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ABSTRACT

Subjective findings of the Atlanta Project are presented. This project's primary purpose was to test and demonstrate the effectiveness of providing intensive vocational rehabilitation services to federal offenders at two specified states in the correctional process. A total of 484 cases were monitored, 107 of which were assigned to the experimental group. The subjects were drawn from releasees and probationers under supervision of the U.S. Probation Office for the Northern District of Georgia and from the inmate population of the U. S. Penitentiary, Atlanta. The project was based on two basic hypotheses: (1) that traditional VR services are ancillary to effecting attitudinal change in the offender client, and (2) that areas essentially innovative to VR concern need to be explored if patterns of criminality are to be interrupted. In brief, the findings are: (1) supportive counseling and psychotherapy proved to be the two most significant services provided; (2) emergency services should be flexible and provided at the point of need; and (3) the client and his family should be treated as a unit rather than simply providing services to the client alone. (Author/DB)

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Atlanta Federal Offenders Rehabilitation Project Final Report

Prepared by

W. Scott Fulton, Project Coordinator

Office of Rehabilitation Services

Georgia Department of Education

A research and demonstration project designed to test and demonstrate the effectiveness of providing intensive vocational rehabilitation services to federal offenders at specified stages in the correctional process.

May 1969

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DEDICATION

This report is respectfully dedicated to the memory of the late Dr. A. P. Jarrell, Assistant Superintendent of Schools for Rehabilitation Services, Georgia Department of Education, whose leadership and vision made innovation possible.

PREFACE

We in Georgia like to believe that traditionally we have been stimulated to explore new areas of vocational rehabilitation. This sort of curiosity led to our original involvement in the late 1940's with inmates of the U. S. Penitentiary, Atlanta.

Therefore, already committed to correctional rehabilitation at that institution, also with the U. S. Probation Office for the Northern District of Georgia, and through our expanding program at the Georgia Industrial Institute for Youthful Offenders at Alto, we were doubly pleased when we were invited in 1965 to participate as a unit of the national Federal Offenders Rehabilitation Program.

For years we held to the belief that many more productive things could be done with public offenders if only certain areas of innovative service could be tested.

The Atlanta Project was able to do this for us. We are privileged to share its findings with others alarmed by crime in the United States and its growing rate of recidivism.

JOHN S. PRICKETT, JR.
Assistant Superintendent
of Schools for
Rehabilitation Services

FOREWORD

The essentially subjective conclusions of the Atlanta Project are presented in this report. In reading it, please bear in mind that it does not contain analyzed data, and no attempt was made to reflect the difference in outcome between experimental and control groups. All of the research material that we collected has been submitted to FOR Program National Headquarters in Seattle, Washington, where it is presently being computerized and otherwise examined. Significant findings will be published by Program Headquarters and distributed sometime late in 1969.

In point of operation, the Atlanta study was illuminated by two characteristics. For one, joint activities of the Office of Rehabilitation Services, the U. S. Probation Office for the Northern District of Georgia and the U. S. Penitentiary, Atlanta, reached a degree of harmony we believe to be rather remarkable in the annals of interagency cooperation. Secondly, via an exploratory process scarcely marked by tranquility in its early stages and never stamped by complacency, we awoke to the cheerful discovery that the disciplines of psychiatry, psychology, sociology, correctional and vocational rehabilitation counseling can all learn one from the others and thereby homogenize toward common destinations.

Our salient finding was basic: public offenders, even recidivists **can** be rehabilitated, both realistically and profitably.

None of us associated with the Project lays claim to a preserve of final solutions. We still have much to learn. Effecting attitudinal change and interrupting patterns of criminality remains a subjective and often mysterious business. But we have harvested some elusive knowledge that we did not have before. It is a pleasure to share our encouragement through this report with others interested in the complex but rewarding field of correctional rehabilitation.

While the efforts and the thoughts of the entire project staff went into the preparation of this report, it was actually authored by W. Scott Fulton, Project Coordinator, who was a resourceful and innovative participant in the study from its beginning, and to whom his fellow staff members owe a special note of thanks for the final task of reflecting our activities in written form.

W. A. CRUMP
Project Director

ACKNOWLEDGEMENTS

Grateful acknowledgement is made to the U. S. Probation Service and the U. S. Bureau of Prisons, without whose support this project simply could not have been started; and particular indebtedness is recognized for the participation of Mr. John C. Carbo, Chief U. S. Probation Officer for the Northern District of Georgia; Mr. Lee B. Jett, former Chief of Classification and Parole, U. S. Penitentiary, Atlanta; Mr. Fred Frey, his successor; and of their respective staffs.

Appreciation is also acknowledged to the Project consultants, who abetted exploration and contributed to the delinquency of conservatism: Dr. Earl D. C. Brewer, Project Consultant and consultant in Research and Sociology; Dr. Edward L. Askren, Consultant in Psychiatry; Dr. John Barnett, Consultant in Psychiatry; Dr. Don Chandler, Project Observer and Consultant in Sociology; and Dr. Henry Harsch, Consultant in Psychology.

The author wishes to express personal appreciation for the guidance of Mr. Percy B. Bell, National Director, and Mrs. Merlyn Matthews, National Research Director, of the Federal Offenders Rehabilitation Program; and for the advice and counsel of Mr. W. A. Crump, Project Director, Georgia Office of Rehabilitation Services; and for the ever-present encouragement and support of his "codefendant in the instant offense," Mr. Jack M. Tipton, Vocational Rehabilitation Counselor.

W. SCOTT FULTON

Atlanta, 1969

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HIGHLIGHTS

Major Subjective Findings for Rehabilitation Workers

The following suggestions are offered to vocational rehabilitation agencies entertaining the idea of developing service programs for public offenders.

1. A substantial percentage of public offenders, even recidivists, *can* be rehabilitated, but the process is long and complex and generally requires more counselor involvement than does working with the physically disabled.
2. Crime still does not pay within the prevalent reward systems of society, to be sure, but for those who are inclined to commit it, all sorts of psychic needs can be met in its perpetration and even its punishment; therefore it seems to be incumbent upon correctional rehabilitation to stimulate its clients toward not only more acceptable, but at least equally gratifying, pursuits.
3. Traditional purchased services, then, are ancillary to effecting attitudinal change.
4. Since supportive counseling is vital to the rehabilitation process, caseloads should be maintained at manageable size.
5. Comprehensive psychological services should never be neglected in favor of the more easily identified vocational services.
6. Emergency services must be flexible and provided immediately at the point of need.
7. In prisoner cases services should begin during incarceration and be continued with little or no interruption into the free world.
8. The client and his family should be treated as a unit, rather than services being provided to the client alone.
9. Thorough vocational evaluation should be attempted in each case, but it should be remembered that plans formulated in the structured environment of incarceration frequently do not materialize under the different stress situations of the post-release competitive free world.
10. The multi-disciplined approach to diagnostics and treatment is more effective than individual efforts.
11. A realistic approach should be maintained toward determining what constitutes adequate social behavior, or the "rehabilitated" offender.

ABSTRACT

As a satellite unit of a national research and demonstration effort involving the Rehabilitation Services Administration, the U. S. Probation System, the U. S. Bureau of Prisons, the U. S. Board of Parole and seven state vocational rehabilitation agencies, the Atlanta FOR Project was launched under Grant No. RD-2078-G on November 1, 1965 and terminated by predetermined design with the completion of this report on May 31, 1969.

In recognition of the national problems posed by a spiraling crime rate and the need to reduce recidivism, the Project's primary purpose was to test and demonstrate the effectiveness of providing intensive vocational rehabilitation services to federal offenders at two specified stages in the correctional process.

Placed by random selection into experimental and control groups, a total of 484 cases were monitored, 107 of which were assigned to the experimental group. The two caseloads were drawn from releasees and probationers under supervision of the U. S. Probation Office for the Northern District of Georgia and from the inmate population of the U. S. Penitentiary, Atlanta.

The Project functioned under two basic hypotheses: (1) that traditional VR services are ancillary to effecting attitudinal change in the offender client and (2) that areas essentially innovative to VR concern need to be explored if patterns of criminality are to be interrupted.

The full national report, being compiled at National Program Headquarters in Seattle, Washington and which will include data analysis and comparative outcome between experimental and control groups, will be available late in 1969. Meanwhile the essentially subjective findings of the Atlanta Project are presented in this paper.

In brief summary, supportive counseling and psychotherapy proved to be the two most significant services provided. It was also found that emergency services should be flexible and provided at the point of need. Third, the client and his family should be treated as a unit rather than simply providing services to the client alone.

ATLANTA FOR PROJECT

I. Introduction

A. Background Information

1. As a satellite project of a national research and demonstration program, this study was an outgrowth of an idea born in interagency conversations. Agency administrators, including former Commissioner of Vocational Rehabilitation, Miss Mary Switzer, and Mr. James Bennett, former Director of the U. S. Bureau of Prisons, explored the possibility of applying vocational rehabilitation techniques and resources to the problems posed by the increasing number of public offenders. Since 1962, the Vocational Rehabilitation Administration (now Rehabilitation Services Administration) has provided supporting funds for ten (10) projects in which the public offender was the focus of the study or services. Early in 1965, a planning grant was extended to the newly conceived Federal Offenders Rehabilitation National Program, and approximately seven (7) months later, the program was launched on November 1, 1965.
2. The national program was a collaborative effort involving the Rehabilitation Services Administration, the U. S. Bureau of Prisons, the U. S. Probation System, the U. S. Board of Parole, and seven State VR Agencies, the Atlanta Project, representing Georgia, being one of eight units (Illinois having staffed two projects) associated with Program Headquarters in Seattle, Washington.
3. In 1947 the Georgia Division of Vocational Rehabilitation assigned a counselor on a part-time basis to provide indicated rehabilitation services to eligible inmates referred by officials at the U. S. Penitentiary, Atlanta. Eight years of experience in this approach demonstrated the feasibility of joint efforts between Vocational Rehabilitation and the U. S. Penitentiary in Atlanta.

Because of this mutual involvement and following the interests on the national level mentioned above, Georgia was chosen as a site for several meetings in 1963, focusing on the rehabilitation of federal offenders. With impetus from Richard Grant of the Vocational Rehabilitation Administration in Washington, D. C., these meetings were largely organized by John W. Forrest, Vocational Rehabilitation Administration Assistant Regional Representative in Atlanta. Officials from the U. S. Bureau of Prisons and the U. S. Probation Service were in attendance.

It was also in 1963 that Emory University became associated with the planning meetings, and Dr. Earl D. C. Brewer was awarded Vocational Re-

habilitation Administration Grant No. SAV-1036-64 for his study of "A Vocational Rehabilitation Study of Prisoners, Probationers, and Parolees."

Three consultations were planned in connection with Dr. Brewer's project. The first was held in December, 1963 for the purpose of reviewing the research design and making suggestions regarding procedures. The participants in this consultation represented each of the institutions and agencies involved in the project plus some outside consultants: Mr. Forrest of Atlanta; Virgil Breland, Perry E. Westbrook, and John B. McGuire, Atlanta Federal Penitentiary; Walter York and M. S. Ausley, U. S. Correctional Institution, Tallahassee; Claude Goza and John C. Carbo, U. S. Probation Office for the Northern District of Georgia, Atlanta; Joseph H. Scarbrough, Georgia Division of Vocational Rehabilitation, Alto; James J. Segars, Georgia Department of Family and Children's Services, Atlanta; Vernon Fox, Florida State University, Tallahassee; Glenn Petty, Division of Probation, Administrative Office of the United States Courts, Washington, D. C.; Mr. Grant of Washington, D. C.; James E. Murphy, U. S. Bureau of Prisons, Washington, D. C.; Dr. Brewer and Marie Townsend, Emory University, Atlanta.

Dr. Brewer's work was carried out in two phases. The first concerned the collection and analysis of general background characteristics of the following three populations: the U. S. Penitentiary, Atlanta, Georgia; the U. S. Correctional Institution in Tallahassee, Florida; the probationers and parolees within the jurisdiction of the U. S. Probation Office for the Northern District of Georgia, in Atlanta.

The second phase involved a detailed study of three hundred selected cases (one hundred from each of the populations). The first phase was presented and discussed at a second consultation in Atlanta, held in connection with a regional meeting of Directors of State Rehabilitation Agencies in April, 1964.

The Brewer Report was published in late 1964. In summary, the evidence reviewed in this study pointed overwhelmingly to the need of additional assistance to prisoners in post-release rehabilitation and to probationers and parolees during their terms.

It is assumed that Atlanta was chosen as a satellite project of the FOR Program primarily because of the activities described above, because of Georgia's early interest in the rehabilitation of public offenders, also evidenced by its growing program at the Georgia Industrial Institute, Alto, because of the Brewer Report, and because of the leadership

and participation in these early meetings of Mr. Carbo, then Supervising Probation Officer and now Chief U. S. Probation Officer for the Northern District of Georgia.

The cooperative agreement between the Office of Vocational Rehabilitation, State of Georgia, the U. S. Probation Office for the Northern District of Georgia, and the U. S. Penitentiary, Atlanta, was formalized on November 15, 1965.

4. Although the project was launched November 1, 1965, and case evaluation began very shortly after that date, the beginning four months were determined to be a "tooling-up" period, and intensive service did not really get under way until March 1, 1966. It continued through the designated termination date of the FOR Program on February 28, 1969.

B. Purpose and Rationale of Project

1. Focusing on the problems imposed by the increasing number of federal offenders, the primary purpose of the Atlanta FOR Project was to test and demonstrate the effects of providing intensive vocational rehabilitation services to such offenders at two stages of the rehabilitation process:
 - a. At the correctional institution, approximately sixty days after admission (designated as Plan C).
 - b. At the time of assignment to the probation and parole office following court action or release from a Federal institution (designated as Plan A).
2. In addition the Atlanta Project has followed these specific objectives:
 - a. To demonstrate the effectiveness of the sustained concern of the Vocational Rehabilitation counselor for the client during the period of incarceration plus a period after return to the community.
 - b. To demonstrate the effectiveness of the Vocational Rehabilitation counselor in contacting and providing services for the unsupervised releasee.
 - c. To demonstrate the effectiveness of the Vocational Rehabilitation counselor's collaboration with the probation-parole officer during supervision of the offender.
 - d. To demonstrate the effectiveness of providing group counseling, or group therapy, to a sample of federal offenders in the Atlanta area.
 - e. To test and demonstrate the effectiveness of making referrals to other VR state agencies in the cases of those clients chosen for a sub-project, who were not natives of Georgia and whose release destinations were therefore outside this state.

C. Setting

Classified as a close custody (or "maximum security") institution, the U. S. Penitentiary in Atlanta has a population of some 2,200 inmates. Approximately 50 per cent of that number is occupied in the paying industries unit, where mail bags for the U. S. Postal Service and mattresses for the Armed Forces are manufactured. Although the Work Release Program is in effect, the total number of prisoners assigned to work outside the institution rarely exceeds 15 or 20 men. Prior to the inception of the FOR Project, one VR counselor was assigned full-time to the penitentiary and later phased into the Project Plan C operation. Since that time two additional staff members have been assigned to the institution, each serving approximately 40 clients. These caseloads, limited to Georgian inmates, are in the process of being expanded. Both counselors work closely with the Vocational Training Unit, where approximately 10 per cent of the inmate population is engaged in learning a variety of trades. Some 700 releasees and probationers are supervised by the U. S. Probation Office for the Northern District of Georgia in Atlanta. This office is administered by a Chief Probation Officer and a Casework Supervisor. Each of the nine Probation Officers supervise approximately 70 to 80 persons. Other than the FOR Project Plan A counselor, no Vocational Rehabilitation staff member was assigned specifically to the office, but such an assignment is being considered for the near future. Within the Vocational Rehabilitation Agency complex prior to its reorganization, which took place a scant two months before the completion of the FOR Project, the Project operated as a small unit of the Program for Public Offenders under the Division of Special Disabilities. Although technical supervision was received from the Project Director, whose primary job was Assistant Director of the Division of Special Disabilities, the two FOR Counselors were administratively responsible to the Atlanta District Supervisor, but for "housekeeping" matters only.

While the Atlanta District Supervisor and the counselors under his technical jurisdiction represented a component of the Division of the General Program rather than Special Disabilities, the District Office nevertheless provided the setting in which the FOR Project operated, it is believed that some description of this environment as it was during the life of the project might be useful.

The District Administrative Staff consisted of the District Supervisor and two Casework Supervisors, these last two having a rather unique line of responsibility direct to a state level staff member entitled the Supervisor for Casework Standards.

Out of a total of 45 professional staff members, ap-

proximately 40 of them were caseload carrying counselors.

Most caseloads involved about 75 active clients and 25 referred clients at any given time. Thus some 4,000 clients received services during the usual fiscal year. The general counselors served clients whose physical disabilities ran the gamut found in the VR lexicon. Included in the caseload carrying compliment were thirteen general counselors, ten counselors serving the mentally retarded, four serving the blind, four serving public offenders, four serving the emotionally ill and five serving a research and demonstration project on the rehabilitation of alcoholics. These figures were average and varied from time to time. Only the thirteen general counselors plus administrative staff and some placement counselors were directly responsible to the general program. All of the rest were contained in either the Division of Special Disabilities or the Division of Special Services.

All of these units combined had a yearly production in the VR sense of some 3,000 plans and 2,000 rehabilitation closures.

The district offices occupied some 10,000 square feet and all combined units operated on an annual budget of approximately \$2,800,000.

Figures on the FOR Project are not included in the above. They will be found in greater detail in the following sections.

It might be noted that midway in the Project, the Casework Supervisors were given theoretical supervision over casework procedures of the FOR counselors, but these supervisory contacts were minimal, about two to each of the counselors during the course of the project, and scrutiny was devoted to paper work procedure only and not actual case handling.

Technical supervision was always available from the Project Director and case staffing was accomplished through the Project Executive Committee, but by and large the FOR counselors were left to their own devices.

II. Methodology

A. Responsibilities

After client assignment (as outlined in paragraph B-2 below), data collection proceeded according to a prescribed schedule, or timetable. The Program Office in Seattle was responsible for pulling all of the data together, gathered from the various satellite projects, and for its analysis.

Data was basically composed of (1) objective information outlining arrest records, client mobility, employment stability, social background, etc., and (2) narrative case histories outlining chronology and containing a variety of subjective elements. Tabulations and

analysis of the findings derived from the submitted material are not available in this document, but will be published in the National Final Report, scheduled for release sometime late in 1969.

In further clarification, the FOR staff consisted of the following: A part-time Project Director, whose primary assignment was that of Assistant Director of the Division of Special Disabilities (as noted above) and whose position was not funded against the Project; and two fulltime VR counselors and their two secretaries, all four of these positions budgeted under the research grant. Both Plan A and Plan C counselors were responsible for compilation of narrative case histories. In addition, the counselors themselves collected and submitted the vast majority of the objective data.

For ready clarification, it should again be noted that the Plan A counselor accepted cases for service either at the point of release from some federal institution other than the U. S. Penitentiary, Atlanta, or at the point of assignment to probationary supervision.

The Plan C counselor posted cases for service during incarceration, six to eighteen months prior to release, and continued to follow them into the free world and through the point of closure.

B. Population and Sample

1. Clients served under this program were selected from the population of the U. S. Penitentiary in Atlanta (Plan C) and from those persons under probationary or release supervision of the U. S. Probation Office or the Northern District of Georgia (Plan A). In order to be considered eligible, a client must have been at least 16 years of age and not over 55, not an alien subject to deportation, must have been released prior to February 29, 1968, and in this project must have been male. These were the only eligibility criteria employed. In the strictest sense, we did not have a sample, but only an applied population. The following statements, outlining unique characteristics of the Atlanta Project clientele, are comparative in nature when applied to the total FOR population.
 - a. The most common crimes committed by the clients of both Plan A and Plan C were auto theft, narcotic violations and violations of Internal Revenue liquor laws.
 - b. Plan A clients had an average number of arrests. Plan C clients had more arrests than the average total program population.
 - c. The age at first arrest for Atlanta clients was about average.
 - d. Plan A clients were average from the standpoint of serious prior convictions. A greater

than average number of felonies were committed by Plan C clients.

- e. Plan A clients had an average number of prison commitments. Plan C clients had more commitments than the total average population.
- f. Plan A clients were average in age at the time of first commitment. Plan C clients had fewer early commitments.
- g. Plan A clients were average in age. Plan C clients were older.
- h. Racial distribution was average in both plans.
- i. Plan A clients were average in education. Fewer Plan C clients had a high school education.
- j. Plan A clients had fewer health problems. Plan C clients were average in this respect.
- k. Plan A clients were average in marital status. Plan C clients had more common law relationships.
- l. Plan A clients numbered fewer users of narcotics and this was true also of Plan C clients.
- m. Plan A clients were average in the use of alcohol. Plan C clients had more problems in this area.

Project clients were not specifically evaluated for social deprivation, and Vocational Rehabilitation criteria for defining this condition have not yet been established. However, it is believed that a very high percentage of our clients would fall into a reasonable definition of this proposed disability. The figure would probably reach 95 percent in Plan C and approximately 80 percent in Plan A. Since eligibility in the FOR Program was established on the basis of conviction alone, our clients were not specifically evaluated for acceptance on the basis of behavioral disorder, but again the percentage of clients who would probably have been determined eligible by customary VR standards under this disability was also very high, probably 80 percent of the Plan A clients and quite possibly 100 percent of the Plan C clients. Credence is loaned to this supposition by the findings of the Plan C Sub-Project. Applicants for services under this program were evaluated for eligibility on the basis of behavioral disorder, and everyone of them proved to be eligible. This does not tell us anything about feasibility, however, and it should in no way be taken to imply that the basic vocational rehabilitation philosophy of accepting each individual case on its own merits should be abandoned.

- 2. Client selection was made by random sampling. Admissions Summaries from the U. S. Penitentiary and classification data from the U S. Probation

Office were reviewed on a monthly and weekly basis respectively and a preliminary determination of prognosis for resocialization or rehabilitation was made on a screening basis prior to interview. From this procedure, Lists of Potentials, indicating such prognoses, were submitted to Program Headquarters in Seattle, at which point clients were divided into one of three groups: the Intensive Service Group, designated to receive services even beyond those prescribed by the Georgia State Manual of Policies, and two control groups, the difference between the two simply being in the degree of research data gathered from each.

Control clients did not receive FOR services of any nature. A few were served under the general state program. No deliberate attempt was made to withhold services from FOR control clients, neither was any intensive effort made to refer them to counselors in the general program. Despite the fact that VR services, or the existence of the rehabilitation program, was made known to the Control Group I clients since they were interviewed and completed questionnaires, very few self-referrals were received by the general program.

- 3. A total of 462 cases were monitored for research purposes. Of this number, 107 were Intensive Service clients, 102 fell into Control Group I and 258 were monitored under Control Group II. This may be broken down by plan. Plan A served 62 Intensive clients and Plan C monitored 40 in this category. Plan A monitored 248 Control Group II cases and Plan C monitored 26 in this designation.

C. Data Collection

Under Plan A, initial interviews were arranged by the counselor and the appropriate probation officer and were conducted in the probation office, at which time the first series of data was collected. A similar procedure was followed under Plan C at the U. S. Penitentiary. Presentence reports were gathered by the Plan A counselor and Admission Summaries and other pertinent institutional data, such as progress reports, were accumulated and submitted by the Plan C counselor. Both counselors periodically submitted continuous narrative case histories and pertinent Georgia VR forms. Under Plan A objective data, as previously described, were gathered near the point of case assignment, again in nine weeks, nine months and then, two years after assignment. This schedule was originally followed under Plan C also, but then was varied to reflect periods of nine months and two years after release from prison, rather than initial contact.

All law enforcement agencies in the Atlanta area were most cooperative in supplying arrest records.

D. Treatment Procedure

Since Intensive clients did not come to us seeking services, but rather were assigned to the project by random sampling prior to their knowledge of its existence in most cases, they first had to be convinced that the program had something to offer. This was not difficult in the great majority of the Plan C cases, since most middle-aged prisoners are either aware of their needs for rehabilitative assistance or think they perceive some other advantage in program participation, for example, enhancement of a parole plan. However, resistance was encountered in approximately one-fifth of the Plan A cases, primarily in those probationers already gainfully employed and who felt they were adequately adjusted.

Once the client's interest had been stimulated and his cooperation apparently secured, diagnostics were accomplished much in the usual VR fashion, with this exception: since specialist evaluations were not needed to establish disability, they were secured only when treatment was indicated.

Plan C utilized prison medical records rather than general medical reports by private practitioners whenever possible, and only when examinations did not interfere with resocialization programs, for example, by causing clients to miss work needlessly.

The same rationale applied to psychological evaluations. They were obtained only when it was believed they would influence case handling.

Ten (10) Plan A clients and seventeen (17) Plan C clients underwent psychiatric evaluation, primarily leading to group therapy.

All Intensive clients underwent vocational evaluation, at the very least by taking the General Aptitude Test Battery.

Once needs had been outlined, rehabilitation plans were developed in cooperative efforts involving counselor, appropriate correctional officer and client.

On the basis of individual need, traditional VR purchased services were provided:

1. Surgery and treatment
2. Prosthetic appliances
3. Hospitalization
4. Training
5. Maintenance and transportation
6. Tools, equipment and licenses

The multi-disciplined approach to case staffing and the determination of client needs was employed when possible. Psychotherapy, either group or individual, was provided when feasible.

Major areas of innovative services explored were: (1) the treatment of the family as a unit rather than simply concentrating on services to the client and (2) the provision of emergency funds at the point of need.

Various other miscellaneous innovative services were provided throughout the program: for example, the purchase of rolling stock, the relocation of families, the liberal but considered purchase of occupational equipment, and the provision of maintenance beyond the limits imposed by general state policy.

Counseling style is as difficult to describe accurately as the counseling process itself. It is believed that both counselors strove to communicate sustained concern for their clients' problems and an awareness of client dignity and value as unique human beings, but possibly these were generally conveyed in somewhat different fashions. Perhaps the Plan C counselor, with more advanced sensitivity training, was verbally more supportive, while the Plan A counselor, with considerable community resourcefulness and acute knowledge of local labor market conditions, was more of an "action therapist." Neither affected a clinical approach or emulated a specific school of counseling. Both did attempt to remain as scrupulously honest with clients as possible in mutual exchange of feelings.

It is also hoped that one of the most prominent features of the counseling procedure was immediacy, or the provision of services at the point of need, or crisis intervention on a reality level.

One of the best aspects of the entire FOR Program was an innovation built into each project. Caseloads were maintained by design at manageable size, no more than 50 Intensive clients at a time. Thus an opportunity was afforded to actually provide counseling and to offer what was believed to be genuine support.

E. Procedure Followed in Preparing Continuation Grant Requests and Final Report

Under the supervision of the Project Director, the Plan C counselor had the responsibility of preparing the budgetary sections and drafting the narrative presentations of grant requests. Once these had been reviewed by the Project Director, they were presented to the Executive Committee. Revisions were made during committee meetings and later refined by the Plan C counselor and the Director. The completed requests were submitted to the Division of Research and Demonstration, Social and Rehabilitation Service, Department of Health, Education and Welfare, Washington, D. C.

Preparation of the final report was accomplished in a similar fashion.

III. Results

A. Formal and Informal Relationships

1. Although this project was jointly sponsored, the Office of Vocational Rehabilitation assumed the responsibility for administration of the working arrangement in cooperation with the U. S. Probation Office for the Northern District of Georgia and the Classification/Parole Section of the U. S. Penitentiary. Since the FOR Program was launched, a new program and a new division were formed within the Vocational Rehabilitation Agency. This was the Program for Public Offenders, a section of the Division for Special Disabilities. The Program for Public Offenders was under the direction of W. A. Crump, Assistant Division Director, who also functioned as Project Director. The overall format of the Project has not changed since its inception in 1965.

Reliance was placed on the Program Office in Seattle for overall general direction; however with a few exceptions relevant to innovative services, this project did not rely heavily on National Headquarters for decisions in specific implementation. In the beginning the Program Office was called upon to assist the Project in program interpretation and procedure, but operational policy was locally established. It is not believed that administrative responsibility in the conduct of the Project greatly changed during its life.

2. In most respects, our present agreement on service to offenders compares favorably to our initial expectations. The major change occurred in certain fields of innovation. For example, we began working with the family as a unit rather than simply the client, and then, too, we developed the provision of emergency services at the point of actual need. Although services, therefore, have expanded since we began, it was not found necessary to alter our former agreement, since the agreement stated that certain services would be provided. These were listed, but the statement was also inserted that services would not be limited to those originally tabulated.

The references in the preceding paragraph are to our written, or formal, agreement. On a more subjective basis, several areas went through a process of discovery and some of them were subjected to change. Perhaps our next comments might best be prefaced, however, by the statement that nothing untoward happened because more than one agency was treating a single client. No doubt because of the past involvement of the Georgia Office of Vocational Rehabilitation with the two Atlanta

Federal Correctional Agencies, no concern was experienced about the possibility of losing case control by any of the participating units.

The statutory assignment of responsibilities to Corrections and the Office of Vocational Rehabilitation Services was recognized. Aside from the consideration of legality, agreement was unanimously reached that VR counselors would not be delegated authority or responsibility for any correctional control whatsoever and that the counselor's role should be strictly posted to the area of treatment. Likewise, correctional officers were not expected to initiate and develop vocational rehabilitation plans. However, we did find that a major key to the rehabilitation of the offender lies in a free exchange of planning information, regardless of basic responsibility. Beyond the clear-cut responsibilities established by mission and law, it was found to be impossible to assign specific areas of concern.

Some overlapping was inevitable. What was found to be important was the amount of genuine communication transmitted between VR and the correctional agencies. Since we adopted the premise that corrections and VR share a common interest in the rehabilitation of offenders, then there really wasn't much difference in basic philosophy, and we believe that the differences in approach that were found to exist varied more according to the training, experience and sophistication of the individual practitioners rather than between agencies themselves.

In the beginning it was difficult for the counselor to develop and implement innovative services. This was no doubt due to a reluctance to depart from the security of established procedure. This problem was eventually overcome and both counselors reached a point of comfortable adjustment in exploring new areas of assistance.

The next problem was also natural enough and not very foreign to governmental agencies in general. Difficulty was experienced in securing identification of the FOR Project as a research, rather than a service, program. This hindrance, too, was also finally overcome, primarily by involving top administrative personnel of the Office of Rehabilitation Services in Executive Committee meetings. In fact one of the major achievements of the Executive Committee was that it was instrumental in having an insertion made in our State Manual of Policies to the effect that should a research and demonstration grant be received, the provisions of that grant would take precedence over all portions of the manual. Once this was published, difficulties with second level supervision, statisti-

cal reporting, casework procedures, etc., were virtually eliminated.

3. Our state VR agency made special financial arrangements to free FOR from general policy limitations. For example, a specific person was assigned to handle all FOR accounts in our bookkeeping department. This greatly facilitated service to clients. After the initial year's operation, there were no problems encountered in obtaining emergency funds for such things as food, shelter, and clothing. Both FOR counselors in Atlanta were furnished with imprest bank accounts, and these greatly enhanced the provision of emergency services.
4. The Atlanta Project most definitely had a functioning, sometimes even fractious, executive committee. However, it was primarily through this unit that we eventually "awoke to the cheerful discovery that the disciplines of psychiatry, psychology, sociology, correctional and vocational rehabilitation counseling can all learn one from the others and thereby homogenize toward common destinations."

Regular membership was composed of the following:

The Project Director, who served as the committee chairman.

The Plan C counselor, who served as Project Coordinator.

The Chief U. S. Probation Officer for the Northern District of Georgia.

The Chief of Classification and Parole, U. S. Penitentiary.

The Plan A counselor.

The Chief Project Consultant, who also provided consultation in sociology and research.

Two consultants in psychiatry.

One consultant in psychology.

The Project Observer, who also served as a consultant in sociology.

With but a few exceptions, this committee regularly met on a monthly basis. As noted above, the Project Director served as chairman. In his absence the Project Coordinator chaired the meetings. An agenda was always provided in advance. Planning for subsequent meetings usually took place toward the end of a prior meeting.

Meetings were held in several localities, because it was believed beneficial for the committee to become acquainted with various installations throughout the Atlanta area in service to particular disabilities. These meetings were not characterized by strict parliamentarianism. The general format was democratic in nature, the chairman,

although functioning as group leader, allowed all members of the committee free and open expression within reasonable adherence to an agenda decided at the beginning of each meeting.

5. The task of the Executive Committee was multi-fold. It was used for the following:
 - a. problem solving
 - b. general project administration
 - c. case staffing and handling
 - d. staff development
 - e. socialization and
 - f. information gathering and dissemination

For example, the project director frequently brought information concerning general agency administration, program planning and development to the committee for general reaction and orientation. The Executive Committee was frequently utilized as an advisory body to organizations within the VR Agency dealing with public offenders, but not specifically involved with the FOR Project. It is believed generally by the committee members that the one major criticism that we might have to offer ourselves is that we occasionally tended to become overly involved from time to time with administrative matters, such as the establishment of fees for consultants. However, it is a consensus that the committee was productive from the standpoint of supporting innovative services in conference with our parent VR agency. It was also invaluable in the area of case staffing.

6. Of the federal agencies active in the Atlanta FOR Project, the Vocational Rehabilitation Administration (now Rehabilitation Services Administration) would most likely be cited as that agency most affecting the outcome, insofar as the program itself was sponsored by VRA. However, as it now stands, both the U. S. Probation Service and the U. S. Bureau of Prisons (represented by the U. S. Penitentiary, Atlanta) should be given equal billing. This project was characterized by the close cooperation of all these agencies, and it is not believed that any one of them affected outcome more than its fellow participants.

B. Parent Agencies in Relation to FOR

1. Vocational Rehabilitation

- a. No services were denied FOR clients because of state or federal agency rules, such as regulations governing the establishment of economic eligibility. Instead services were provided on open assessment of client need.
- b. Within the limitations of available finances, our

State VR Agency does not ration services in the general sense, that is, certain fee schedules are adhered to, some specific purchases are controlled, but no ceiling amount is placed on a case involving any given disability. Applicants must meet eligibility requirements and be considered feasible for eventual employment, but lack of cooperation must be amply demonstrated before services are declined. Services to FOR clients were in no way rationed beyond the financial boundaries set by the awarded research grant.

- c. Our State VR Agency does have a closure quota system.

At one point it did affect FOR indirectly in that we were compared, naturally unfavorably, with other units within the agency. However, this sort of "pressure" was never serious so far as the project was concerned. Once our identity as a research effort had been established, we were in no way affected by the closure quota system.

- d. It is believed that several qualities made our State VR Agency a good choice for FOR research. For one, we have worked with Federal Offenders at the U. S. Penitentiary, Atlanta, for many years, at one time on an itinerant basis and later by the assignment of a full-time counselor. In addition, we have had a comprehensive program at the Georgia Industrial Institute, Alto, for young offenders since 1963. In general, the policies of this state agency are liberal and broadly stated. They are used, generally, as guidelines, which might be broached upon reasonable presentation of necessity for doing so on a basis of client need. Georgia VR has a history of pioneering innovative services with several disabilities. It has always been an agency that has been receptive to experimentation in research and demonstration. It should also be recognized that the late Assistant Superintendent of Schools for Rehabilitation Services, Dr. A. P. Jarrell, was extremely progressive.

2. Probation/Parole

- a. During the calendar year 1968, each of the nine probation officers of this district who carry a full caseload (the chief and the supervising probation officers do not carry full caseloads) completed an average of six presentence reports per month and had an average of 84 persons per month under supervision. All probation officers did both presentence investigations and supervision. Assignments were

made on a geographical basis. Each officer was responsible for a portion of metropolitan Atlanta as well as a segment of the outlying area of the 46-county district.

- b. Probationers and parolees who lived in metropolitan Atlanta reported to the probation office in person between the first and seventh day of each month. The office was open until 9:00 p.m. on the first Monday and first Wednesday of each month with the full staff of officers present. The Plan A VR counselor also scheduled appointments with clients during the reporting period, often at night. Clients who lived outside the metropolitan area of Atlanta reported by mail. Personal and collateral visits were made by the probation officer during monthly field trips.
- c. Each officer strove to have personal contact with each of his clients no less than once a month. When the press of presentence work and other responsibilities did not permit this, officers saw clients on the basis of need. Crisis situations were given immediate attention, no matter how time consuming the problems might be. There was no real conflict between officers and VR counselors with respect to choosing clients for whom real effort would be expended, since such decisions were handled on a collaborative basis.
- d. Conditions of supervision, such as travel restrictions, the avoidance of association with known criminals, etc., did not stand in the way of the VR counselor's plans. This area was also handled in cooperative fashion.
- e. The U. S. Probation Office for the Northern District of Georgia has throughout several years shown considerable interest in the vocational rehabilitation process. The present Chief Probation Officer participated in the early planning of the FOR Program prior to its actual inception. Staff morale seemed to be exceptionally high. Although by no means willing to abdicate client responsibility to the VR counselor, all officers in the district have evidenced a willingness to cooperate in vocational rehabilitation planning.

Although the Chief Probation Officer possessed strong leadership qualities, he was receptive to suggestions offered by his officers and he treated reasonable ideas with an open mind. The judges of the Northern District of Georgia were also responsive to suggestions made by the Probation Office and judgements were then handed down with impartiality.

3. Prison Classification and Parole Office.

- a. Each parole officer had a caseload of approximately 280 inmates. Nearly 80 per cent of the caseworker's time was spent on administrative matters: preparing Admissions Summaries, Progress Reports, and completing various other items of paper work. This allocated about 20 percent of his working schedule for actual client contact.
- b. Inmates did not regularly report to the parole office on a specified day of the week. A period in the middle of the day, known as "Happy Hour", was set aside for inmates to contact their parole officers if they wished to do so without first having to be called out for the purpose. In other words this contact was voluntary. Because of the large caseloads carried by each officer, inmates were not ordinarily called out unless there was a specific reason for doing so, such as the preparation of an Annual Progress Report. This is not meant to imply that inmates were seen only once a year, because they were interviewed whenever a change in current program was indicated or if some other matter indicative of attention arose. In addition to the noon hour period, an inmate could make written request for an interview on the basis of legitimate reason.
- c. It seemed that the complainers, the trouble makers, and those prone to crisis situations received the most attention. Again there was no real conflict between parole officers and the VR counselor with respect to choosing clients for whom real effort would be expended.

Most of the officers were well aware of the research nature of the FOR Project, but two or three of them occasionally expressed displeasure that tax revenue was being expended on inmates they considered to be particularly worthless or those they believed to exhibit most unfavorable success prognoses. Despite these few occasions, however, an atmosphere of cooperation prevailed.

It would be interesting to record how these predicted failures fared under FOR services, but no records were kept at project level of individual caseworker predictions. It is the counselor's impression that they were fairly accurate and they will be borne out in the National Report.

- d. The only condition of release that demanded sudden adjustment in rehabilitation planning was the parole granted on short notice. This was not a serious problem and these adjustments

were ordinarily accomplished without undue difficulty. Work release did not pose any problem at all. All FOR Intensive Clients were known as such by their parole officers. Consequently the counselor participated in work release planning, particularly in job placement, but carried no decision making authority in determining client eligibility for the activity and did not presume to initiate any request for work release assignment.

The Chief of Classification and Parole participated actively on the FOR Executive Committee. His cooperation in institutional administrative matters was invaluable in the gathering of research data and the facilitation of case-work.

C. Interaction Among Staff Members

1. In the case of institutionalized clients and of those under some form of release supervision, case control primarily, logically, and legally, rested with corrections. Vocational Rehabilitation was looked upon only as a strong community resource. Both the correctional agencies and Vocational Rehabilitation were obviously working toward the common goal of offender rehabilitation, and as such, individual efforts were directed toward like destinations. There is no question that functional overlapping occurred in many cases during the life of the project.
2. The VR counselor operated differently from the correctional staff member in the degree of authority exercised upon clients. The counselor had no legal authority to require, for example, that clients adhere to any program outlined for them, whereas the correctional officer was charged with the responsibility of seeing that clients followed the rules of probation and obeyed institutional regulations. However, no great difference in philosophy was discovered and counseling techniques were found to be surprisingly similar and based upon the same treatment orientations. The essential differences in equipment were located in the correctional officer's legal authority and the financial resources available to the VR counselor. So far as toleration toward failure was concerned, there seemed to be, in general, little difference in attitude, and when legally possible, correctional staff seemed willing to make allowance for infractions not serious enough to warrant official action.

The really big asset in the possession of the VR counselor was sufficient allowance in time to work intensively with clients in an expression of sustained concern.

3. Correctional Staff Reactions to Vocational Rehabilitation Counselors

- a. The probation officer did not view the VR counselor as representing a threat to his authority. Again, he saw the counselor as an envoy of strong community resource.
 - b. By statute, control of clients assigned to the Probation Office is vested in either the U. S. District Court, U. S. Board of Parole, or the Adjutant General, Department of the Army, depending on the client's status, that is, probation, parole, mandatory release or military parole. Control is exercised through the probation officer who is the authorized representative of the heretofore named agencies. Therefore the VR counselor scarcely represented a threat in this area. And it would appear that Vocational Rehabilitation by the nature of its own design would not wish to control supervision. The demarcation of authority, if anything, was more apparent in the institutional setting. In fact the Plan C Counselor made a deliberate effort to establish and maintain his identity as a representative of a free world agency without correctional authority of any nature. This was done in the belief that emphasis on association with the free community was more amenable to developing positive resocialization attitudes in the client, and it seemed apparent that this identity was favorably received by clients and penitentiary caseworkers alike.
 - c. Correctional staff and the two project counselors, in sharing cases, concluded that extensive use of the counselor in the correctional rehabilitation process was appropriate, non-conflicting, and effective.
 - d. It is the opinion of the Atlanta Project participants that correctional and vocational rehabilitation staff identities and affiliations should remain as they now stand and that VR counselors should be assigned to probation offices and institutions with duties and responsibilities outlined by inter-agency agreements.
4. Close case staffing was a feature of the Atlanta Project.
- a. VR case records were supplied to corrections at the point of rehabilitation plan development. Admissions Summaries, pre-sentence investigations and progress reports were supplied to Vocational Rehabilitation in all cases.
 - b. The VR counselors attended correctional staff meetings only on specific occasions, for example, to provide or receive orientation on topics

of mutual interest. Such attendance occurred about twice a year.

5. No veto was exercised by correctional staff on any major occasion. Both VR counselors were well enough acquainted with correctional regulations to avoid making unreasonable requests. Concurrence for all major planning was sought and received in an atmosphere of cooperation, but no rigid set of rules was laid down for this procedure.
6. In all honesty, no tensions were observed in staff job definitions. So far as is known, they simply did not exist to any notable degree.
7. The primary change in operation occurred as the Plan C Counselor removed his activities from the Penitentiary to the Atlanta VR District Office, where, incidentally, records and clerical support were housed throughout the project. This change was not abrupt and took place gradually as project clients were released from prison. The shift in emphasis of treatment is synonymous to the difference in working with clients in the structured institutional setting and that of the free world.

D. Relationship Between VRC and His Parent Agency

1. The Plan A Counselor was originally located in the U. S. Probation Office complex itself. Later, because of the shortage of space created by the allocation of an additional officer, his operation was transferred to an office rented by Vocational Rehabilitation just across the street from the Probation Office. It was believed that the Plan A Counselor should be located as nearby as possible to the Probation Office in order to facilitate not only client contact but also the accumulation of necessary research material. The Plan C Counselor occupied two offices: one in the Atlanta District Office and the other at the U. S. Penitentiary. The office at the Penitentiary was maintained in order to facilitate initial contact with Plan C clients and to carry on case services while the clients were still incarcerated. It was believed from the very beginning that an outside office would be absolutely necessary in order to afford released clients a point of contact with the Plan C Counselor after discharge and also because of the problem of the confidentiality of records, telephone facilities, and the availability of space for clerical staff, file cabinets, etc. The Plan A counselor spent approximately 25 percent of his time in his own office, approximately 25 percent in the correctional agency's office, and 50 percent of his time in the field contacting clients. In the beginning, the Plan C Counselor spent approximately 75 percent of his

time at the institutional office and only about 25 percent in his own office. Throughout the project each counselor spent approximately 5 percent of his time in the VR Agency State Office. Toward the end of the project, all of his clients having been released (except two (2) who were reincarcerated) the Plan C Counselor spent almost no time at all at the Penitentiary and the institutional office was abandoned. Because of additional project-connected administrative and planning assignments, this counselor then devoted about 60 percent of his itinerary to his down town office and some 30 percent to the field contacting clients and gathering data, the remaining 10 percent being devoted to the State Office and various conferences and meetings.

2. The degree of isolation suffered by the project counselors from other VR counselors was not significant, although some of it was inevitable. However, this was compensated for by bimonthly staff meetings with the entire staff of the Atlanta District Office.
3. In Atlanta, the project counselors were fortunate insofar as two of them were assigned to the project. It is only understandable that they identified mostly one with the other in the sharing of woes and successes rather than with other project participants.
4. It should be emphasized that the Atlanta Project was characterized by the amount of responsibility delegated to the counselors themselves. Supervision was always available from the Project Director upon request, but after the initial "tooling-up" period of the project, the counselors themselves approved treatment procedures. Only when monetary decisions were of considerable magnitude were the counselors obligated to request administrative advice. Since the counselors alone were primarily responsible for both monetary and treatment decisions, the two were easily coordinated.
5. It is believed that an exceptional amount of discretion was afforded each of the Atlanta counselors. Although it was difficult in the beginning to exercise individual discretion in the provision of innovative services, both counselors rapidly developed this facility.
6. There has been little question in the Atlanta Project but that the Project Director was the closest ally of the counselors when agency approval for new and radical case services was needed. Additional support was given by the State Supervisor for Physical Restoration Services and various different heads of Bookkeeping and Accounting.
7. Both counselors had previous experience in working with public offenders. The Plan A Counselor

had been previously employed by the Fulton County Probation System in Atlanta and the Plan C Counselor had approximately one year's experience as a VR counselor in working with federal offenders prior to the beginning of the FOR Project. A greater understanding of research and of the sort of information that the parent FOR Program was seeking would have been of tremendous help to the counselors in understanding the necessity for administering the various devices called for by the program. Although it may sound somewhat facetious, the counselors were occasionally under the impression that (1) correctional participants would have preferred that the counselors were more competent correctional officers, (2) behavioral scientists on the consulting staff would have preferred that the counselors were more psychologically oriented and (3) the State Office Bookkeeping Department would have preferred that the counselors were more competent accountants. No doubt the Seattle staff would have preferred that the counselors were more competent researchers. In general, the counselors thought that they were pretty good counselors.

The following on-the-job training suggestions might be appropriate:

- a. Further training in abnormal psychology.
- b. Job analysis.
- c. Interpretation and utilization of psychological testing.
- d. Further training in behavioral modification.
- e. Further sensitivity training.
- f. Further training in the theories of vocational evaluation.
- g. Management practices.
- h. Cultural anthropology.
- i. Family and marital counseling.
- j. Basic principles of data processing.

E. Client Needs and Treatment

1. Our purpose in this section is to illuminate the primary needs of public offenders as we subjectively perceived them through observation of our randomly assigned clientele. It seems logical to assume that most of these needs existed at the point of assignment to the project caseload, or at least were inherent at that time, but a number of them were not revealed until some later period in the diagnostic or casework process; for example, with the exception of these who participated in group psychotherapy while still incarcerated, we had relatively little to go on in assessing the social and familial problems that might be encountered

by any given prisoner client once he was discharged to the very different stress situations of the unstructured free world.

We are much encouraged by the number of these problems that were overcome with project assistance. Of course some were not and still exist. In this part of the report, however, we have not tabulated outcome, but, again, are attempting only to illustrate the primacy of offender needs. One exception may be found in the outcome observations by the Plan A Counselor on those of his clients who are now in prison.

As previously mentioned, we did not have the benefit of data analysis on the project level and the significant findings to be published later by Program Headquarters in Seattle may invalidate some of our statistics.

The following is a listing of the primary needs of each intensive client of both Plan A and Plan C by caseload number.

PLAN A

- 8 Client is now in prison. Primary need is re-adjustment to the free world after release.
- 9 Client deceased (murdered).
- 11 Needed to stay out of lottery business.
- 14 Client is now in prison. Primary need is re-adjustment to the free world after release.
- 24 Client needed higher education commensurate with academic potential.
- 38 Client needed more stable home life and ability to live within income.
- 43 Client needed more formal education and better living conditions commensurate with potential.
- 56 Client is now in prison. Re-adjustment to the free world is client's primary need after release.
- 63 Client needed to establish home for mother and daughter.
- 75 Client is now in prison. Re-adjustment to the free world after release is client's primary need.
- 89 Client now in prison. Re-adjustment to the free world after release is client's primary need.
- 94 Client now in prison. Re-adjustment to the free world after release is client's primary need.
- 98 Client had long prison record, had never been able to control temper and developing such control as well as better money management were his primary needs.
- 100 Client needed to overcome heavy drinking problem, lack of maturity, poor work habits, and needed greater education.

- 107 Client needed to break away from a family with a long history of making illicit liquor and to break himself of the habit of attempting to earn "easy" money and needed better education commensurate with his potential.
- 146 Client suffered from reduced income due to criminal record, needed to regain an income equal to his old job before conviction and thus the ability to re-establish higher patterns of living.
- 161 Client showed lack of good judgment and was an habitual liar. Needed to act more like a man.
- 173 Client's primary need was to establish a home, also needed increased income.
- 175 Deceased.
- 177 Client needed to increase his income to meet his family obligations.
- 202 Client had long history of hanging around with the wrong crowd. Needed to increase his income and improve his associates.
- 204 Client's primary need was to be recognized by his company and friends. He had been on the same job for twelve years without a promotion.
- 221 Client's primary needs were for higher education and better living conditions.
- 228 Client associated with the wrong crowd, was weak and lazy. Primary need was to take a long look at himself.
- 231 Client was 48 years old, lacked skills, needed training.
- 248 Client needed training commensurate with limited intelligence.
- 252 Client had lived a restless life, had always been a "con" artist. Needed to settle down and had ability to do so.
- 254 Client had been in liquor business for many years. Had very little other experience. His primary need was to secure employment that paid as much money as the liquor business.
- 269 Client needed to develop more determination toward specific objectives.
- 275 Client worked eighty to ninety hours per week (24 hour grocery store job) needed to spend more time with family.
- 279 Client needed to make better use of his earnings, made good money during the summer, however, was often laid off during the winter (construction work).
- 287 Client needed to mature and stand on his own feet. His father had spoiled him.

- 314 Client was weak, needed to separate from crowd of male thieves and other undesirable associates.
- 323 Client was a "smart guy" with more know-how than anyone. Needed to change his attitude.
- 327 Client had ability to complete college and do well, however greater application was his strongest need.
- 328 Client needed to increase his income and secure better living quarters for his family.
- 332 Client had family problems which needed attention.
- 334 Client was immature, let his family keep him in difficulty, and needed to secure more stable employment.
- 338 Client is now in prison. Primary need is readjustment to the free world after release.
- 342 Client had lack of education, needed motivation to improve himself.
- 343 Client needed to overcome serious drinking problems.
- 347 Client now in prison. Primary need is readjustment to the free world after release.
- 353 Client had good background and came from a nice family, but needed the motivation to take advantage of his opportunities.
- 367 Client had a lack of education and needed motivation to improve himself.
- 369 Client revealed complete lack of regard for society, refused to obey its rules and needed to take a long look at himself.
- 381 Client has absconded, warrant has been issued. Client's most urgent need is to straighten himself out with the authorities.
- 383 Client suffered from the lack of education, however, had to work to support his mother and younger brothers and sisters and therefore, his most urgent need was more income.
- 386 Client is now in prison. Primary need is readjustment to the free world after release.
- 390 Client needed to establish family and community ties.
- 424 Client had refused to take advantage of opportunities, preferred to be a hippie and not work. Needed to overcome these attitudes and also needed more formal education.
- 436 Client now in prison. Primary need is readjustment to the free world after release.
- 555 Client was in poor health, a heavy drinker, would not work regularly. Drew a VA Pension, therefore, saw no need to improve himself and was content with this sorry lot.
- 709 Client lived with family in a small town 50 miles from Atlanta, needed more education, however, would not overcome the obstacles necessary to obtain it.
- 711 Client was skilled elevator repairman, earned \$1,000 per month, however, lacked ability to properly manage his money.
- 713 Client wished to attend airplane repair school, however, failed to pass G.E.D. and needed more education training.
- 714 Client lacked motivation to follow through with his opportunities.
- 717 Client was a "hippie" refused to work, and needed therapeutic assistance in overcoming his maladjustment.
- 721 Client was a hard worker and tried hard, however, lacked ability to manage money and needed to develop this.
- 724 Client refused to take advantage of opportunities, was content to stay on hard, low paying job, and needed to stay away from the associates that led him toward "easy" money and trouble with the law.
- 741 Client misrepresented his educational background to all concerned, and constantly tended toward lying, needed to settle down in one field and do a good job in any one chosen occupation.
- 805 Client needed to settle down on one job and prove himself at least once.

PLAN C

- 20 Client needed to overcome drug addiction.
- 33 Client needed to recognize and adjust to the ambivalent love-hate feelings for his mother that have governed so many of his actions throughout his life and also needed to recognize the fact that his criminality had reached the stage of a serious disease that could not be overcome simply by intelligence and vocational skill.
- 46 Client greatly needed a feeling of acceptance and understanding of his various psychological problems, also needed status and recognition through the vocational skills that he did obviously possess, needed money for necessary occupational tools.
- 48 Client needed to overcome long, deep-seated patterns of criminality.
- 55 Client needed to take better physical care of himself and stop relying upon the crutches of alcohol and barbiturates.

- 59 Client needed to overcome the detrimental influence of a very domineering wife and to develop a more positive self-image.
- 77 Client needed money to provide occupational tools.
- 145 Client needed to recognize violation of IRL as a crime despite the long history of bootlegging that his family had produced, or, if he did not realize it was a crime, he at least needed to come to grips with the fact that he spent a lot of non-productive time in prison because of these violations.
- 169 Undetermined.
- 197 Client needed to secure employment commensurate with his high degree of verbal skill, lack of manual dexterity and work experience, and also needed to overcome strong dependency upon mother.
- 203 Client needed to fight his way out of extremely difficult, overwhelming family and domestic problems and to resolve the fact that he simply had a poor marriage on his hands.
- 242 Client, although extremely intelligent and highly skilled vocationally, needed to overcome his almost overwhelming desire to return to the security of prison.
- 251 Client needed to mature and develop a sense of responsibility through success experiences.
- 260 Client needed to overcome deep-seated patterns of criminality and a tendency toward violence.
- 322 Client needed a settled family home life and the sort of job placement that would enable him to use his highly developed skill as a paper cutter without being physically damaged by his below-knee amputation.
- 417 Client needed to overcome a serious drinking problem, needed training commensurate with his high degree of intelligence and clerical skill, needed success experiences and improvement of self image.
- 458 Client, despite exceptional intelligence, was a psychosomatic paraplegic and needed long term institutional care in a mental health facility.
- 466 Client needed employment commensurate with intelligence and skill, needed adequate income to support his family and needed sufficient vocational status to overcome feeling of inferiority toward his in-laws.
- 477 Undetermined.
- 544 Client needed a great deal of warmth and sustained concern in readjusting to the free world after many, many years as a veteran convict, needed an understanding employer.
- 522 Client needed to develop a sense of responsibility and more acceptable work habits.
- 557 Client needed employment with sufficient income to meet his own and family needs, needed to be reminded that he was a worthy human being and not necessarily a professional criminal.
- 625 Client needed to overcome the most marked development of denial evidenced on this case-load, needed to throw off the effects of a really tragic and terrible childhood, needed to develop genuine rather than extremely ambivalent feelings toward people in general, strongly needed success experiences.
- 632 Client needed money, needed to overcome a pattern of violent behavior by recognizing the feelings that produced such behavior.
- 663 Client needed job placement commensurate with his highly developed vocational skill and needed support of the positive feelings that he had already developed in such areas as responsibility, etc.
- 676 Client needed to try and stop "conning" the whole world and utilize a genuine approach toward something, anything, other than criminality.
- 681 Client needed desperately to adjust to his homosexuality and to overcome habits of truly dangerous violence.
- 704 Client needed long-term care in some sort of a public institution for the rest of his life, because of mental retardation, illiteracy, extremely poor physical condition and total lack of work experience.
- 925 Client needed to find employment commensurate with his intelligence but lack of work experience.
- 932 Client needed to develop more acceptable work habits in conjunction with a highly developed vocational skill.
- 1003 Client needed to be honest with himself and with others as far as his feelings and motives were concerned, needed to overcome what is apparently a chronic habit of lying.
- 1089 Undetermined.
- 1095 Client needed to mature, throw off extremely strong dependency upon his mother, needed success experiences very much in employment commensurate with his intelligence but lack of skill.
- 1244 Client needed an employer who would understand that he would be a very determined and probably loyal employee if it was only under-

stood that he was functionally and vocationally retarded.

- 1271 Client needed a settled family life and employment commensurate with skill.
- 1348 Client was another who needed to stop trying to con the whole world and take a genuine approach to something, a marriage, a job, helping agencies and persons, anything.
- 1349 Client greatly needed to overcome his fear of the free world after a lifetime behind bars and to realize that he was vocationally limited because of his age, lack of education and skill.
- 1409 Client needed to overcome a severe drinking problem, needed to be treated for a condition that bordered on the psychotic and needed to rebuild himself with assistance into at least a reasonable facsimile of a member of the human race.
- 1531 Client needed to recognize violation of IRL as a crime and that he spent many unproductive years behind bars and needed to recognize his guilt feelings toward wife and children because of his lack of family leadership while in prison.
- 1535 Client needed employment commensurate with vocational skill and an employer who would recognize his potential of loyalty, determination to succeed and hard work.
- 1790 Client needed to adjust to his homosexuality, needed some sort of positive self-image.

The following is a summarization of client needs:

PLAN A

Readjustment to free world	13
Avoid gambling	1
More education	12
Overcome domestic problems	8
Recognize and adjust to feelings	3
Overcome drinkling problem	3
Adequate employment (higher income)	8
Need to mature	15
Acceptance and recognition	1
Training	2
Better money management	3
Improve work habits	3
Undetermined	3

Note: Only primary needs are indicated. Many clients had most of these needs in secondary degrees.

PLAN C

Overcome drug addiction	1
Recognize and adjust to feelings	14
Acceptance and understanding	9
Money (or increased income)	5
Overcome deep patterns of criminality	6
Overcome drinking problem	15
Employment commensurate with ability ..	15
Overcome domestic problems	4
Long-term institutional care	2
Improve working habits	2
Undetermined	3

Note: Primary problems only are indicated. Many clients had most of these needs in secondary degrees.

- b. Evaluating true client needs is an extremely complex process. To the best of our knowledge there are no standardized tests that would suffice in working with offenders. It is extremely difficult to identify needs because offender clients themselves have a great deal of difficulty in formulating an accurate expression of them. It is our belief that they do not necessarily do this capriciously, but out of an innate inability to recognize their own feelings. It is believed that the best known method for evaluating offender needs derives from a multi-disciplined team approach to case diagnostics. Each case must be examined individually, and we do not have a standard procedure that might be applied to all of them. Until something more concrete is presented, a studied consideration of available objective data moderated by encounter observations and subjective professional judgement must remain in consideration as our most reliable yardstick.

Psychological testing was seldom used in this project. Since eligibility was based upon conviction alone, testing was not necessary to establish eligibility on the basis of behavioral disorder. The Revised Beta and the SAT, administered by prison staff psychometrists, were employed to indicate range of intelligence and level of academic functioning. It was believed that projective testing would be extraneous unless there was some indication that it might actually be used to determine case handling. We relied more upon psychiatric evaluation, usually in a group setting, or the multi-disciplined approach to case staffing.

- c. The need to improve our evaluative techniques is realized, and we are presently searching for

ways to do this. For example, an effort is being made to determine whether or not we can develop any sort of valid prediction tables based on information from the Georgia Industrial Institute for Youthful Offenders already in our data banks coupled to a follow-up study after release.

- d. Not too much success was experienced initially in spotting client needs. We do not really feel overly defensive about this because we were essentially entering a new field and more or less feeling our way along as we went.
 - e. An inaccurate initial identification of needs doubtless slows down case progress, but unless it results in a disastrous decision, it is not believed that it necessarily would affect success in the long run. Basic needs, such as food, clothing, and shelter are fairly easy to identify, and if one accepts the premise that the majority of public offender clients share a need to understand and recognize their feelings and how they manifest themselves in behavior, then treatment during an extended period of psychological diagnostics would probably not vary too much until these deeper needs have been identified.
2. All traditional VR services are applicable to the offender population on the usual basis of individual need. The services indicated to meet the needs outlined above (Section E.1.a.) were by no means provided in all cases, primarily because particular clients declined to accept them from the beginning or did not follow through with rehabilitation plans. Services were provided by category to the caseload percentages tabulated below (Outcome, either in success or failure, is not shown. Figures are based upon total caseloads and not just cases served.)

CASE A

a. Counseling and Guidance	49%
b. Psychotherapy	23%
c. Physical restoration	6%
d. Maintenance (includes housing, clothing and transportation)	18%
e. Job placement	26%
f. Prosthetic appliances	1%
g. Occupational tools	27%
h. Training	10%

PLAN C

a. Counseling and guidance	82%
b. Psychotherapy	34%
c. Physical restoration	20%

d. Maintenance (includes housing, clothing and transportation)	58%
e. Job placement	60%
f. Prosthetic appliances	11%
g. Occupational tools	38%
h. Training	4%

Since most public offenders are interested in monetary gain and also in their vocational images, it might be said that the majority of them could benefit from training. However, the problem in this area is that they are not willing to pursue long range goals without the prospect of immediate reward. It might be noted that six clients under Plan A successfully completed courses in training, but only one accomplished this in Plan C.

3. Not too much can be said about our tailor-made innovation handed down from Program Headquarters: caseloads were maintained at manageable size, no more than fifty (50) active clients at one time. This permitted the two counselors to provide much more intensive and supportive counseling than is ordinarily available to VR clients. Two other major areas of innovation were: (1) services to the family as a unit rather than just to the client and (2) the provision of adequate emergency funds promptly at the point of need. It is believed that all of our clients, or nearly all, living in association with parents, wives, or somewhat less binding affiliates, were probably in need of family services of one nature or another: involvement of unit members in rehabilitation planning to say the least, not to mention budget counseling, minor medical service and job placement for dependents. It is estimated, however, that we did not work with more than 25 percent of the families who were in need of any type of service. This was due, not to hesitancy on the part of the project, but more to reluctance on the part of the families themselves.
4. Expenditures for case services by traditional categories were:

PLAN A

a. Diagnostic procedures	\$ 1,141.10
b. Surgery and Treatment (includes psychotherapy)	1,737.14
c. Prosthetic appliances	24.50
d. Hospitalization	170.00
e. Training	6,596.25
f. Maintenance and Transportation	748.77
g. Occupational tools	7,609.19
h. Other	1,039.89
Total	\$ 19,066.84

PLAN C

a. Diagnostic procedures	\$ 3,787.66
b. Surgery and Treatment (includes psychotherapy)	10,263.97
c. Prosthetic appliances	710.13
d. Hospitalization	4,049.45
e. Training	1,922.67
f. Maintenance and Transportation	15,818.72
g. Occupational tools	12,238.65
h. Other	00.00
Total	\$ 48,791.25

Total Project Expenditures:

a. Diagnostic procedures	\$ 4,928.76
b. Surgery and Treatment (includes psychotherapy)	12,001.11
c. Prosthetic appliances	734.63
d. Hospitalization	4,219.45
e. Training	8,518.92
f. Maintenance and Transportation	16,567.49
g. Occupational tools	19,847.84
h. Other	1,039.89
Total	\$ 67,858.09

5. It is contended that clients were primarily motivated toward the use of FOR services by the development of confidence in the counselors and in the sincerity of the project's efforts to genuinely assist. It is believed that correctional staff helped significantly in this area, particularly in arranging initial client contacts, but authoritative pressure was not brought to bear.
6. Monetary rewards, as such, were not provided in any case. It may be true that the provision of maintenance funds was in some cases abused, but not flagrantly so. It is genuinely thought that clients continued in the rehabilitation process primarily because of the trust developed in the project itself and in its aims.
7. Both counselors saw an understanding of failure as part of the job. Since the two of them had worked with public offenders in the past, they were no doubt cushioned by prior experience and did not become unduly alarmed by the spectacle of a shattered rehabilitation plan. The clients, too, were comforted, as it were, by the past. Unaccustomed as most of them were to job stability, those that abandoned established vocational objectives seemed to do so unburdened by excessive guilt and were quickly returned to emotional tranquility upon the discovery that the counselors had not banished them forever from the project.

8. In prisoner cases it is our thinking that VR should become involved while the clients are still incarcerated and that services should not be withheld until the point of release. Although it would be unrealistic to adopt a case for service at a time in inordinate advance of release date, in some cases two years prior to discharge is a desirable point to initiate services, particularly if a treatment or training program of any sizable duration is considered desirable during incarceration, for example, group psychotherapy. A major advantage in working with clients for appreciable periods prior to release is found in the opportunity to develop client-counselor relationships. If the two are on reasonably sound footing at the point of discharge the counselor is enabled to function as a transitional bridge between the structured environment of prison and the high speed competitive vocational and social atmosphere of the free world. If the counselor is already operating effectively with the client at the beginning of the critical immediate post-release period, the chances of lost contact are greatly reduced and the prospect of success is enhanced by cohesive continuum.

In Atlanta, because of the limitation of time between conviction and sentence, we did not find it practical to work with probationers during the pre-sentence investigation stage, and it is suggested that involvement with these clients begin only after conviction and sentence to probationary supervision.

F. Caseload Results

This section deals with the specific caseload results achieved with Intensive Service clients.

Please note that comparative findings with control clients are not represented, information on a local level about them being relatively limited. However, it is our understanding that such comparative findings will be presented in the Final National Report and that contributive data is presently being accumulated by the national research staff, primarily based on FBI arrest records. Also, it should again be understood that all data analysis will be accomplished by the national staff rather than project personnel.

1. Plan A

Plan A monitored a total of three-hundred and seventy-two (372): Sixty-two Intensive cases, sixty-two Control I cases and two hundred and forty-eight Control II cases. The following closure tabulation applies to the sixty-two Intensive cases.

Number	VR Status	FOR Category	Percent
23	26	Adequate Soc. Performance	38%
7	28	Non-Cooperative	11%
1	28	Death	2%
12	30	Non-Cooperative	20%
10	30	Inability to contact	16%
1	30	Death	2%
7	30	In Prison	11%

A more descriptive listing of the non-successful cases follows:

Number	VR Status	Reason	Percent
8	28	Reincarcerated or Fugitive	13%
1	28	Death	2%
10	30	Reincarcerated or Fugitive	16%
1	30	Death	2%
20		(Sub-totals)	33%
2	28	Loss of Contact	3%
16	30	Not Interested	26%
18		(Sub-Totals)	29%

In summary, the following might be noted:

- Thirty-eight (38) percent of the cases assigned were successful.
- Four (4) percent died while in active status.
- Twenty-nine (29) percent of the cases were failures from the standpoint of presently being in violation of the law, but only eleven (11) percent of the total assignment received services and also resulted in failure.
- We do not know the outcome of twenty-nine (29) percent of the caseload. So far as we can tell at this point these clients are not afool of the law, but we are not in contact with them. In this category, eleven (11) percent of the total caseload received services without known result or, that is, without successful measurement being completed within the stringent FOR closure criteria. Also in the unknown category, thirty-seven (37) percent of the total cases assigned did not progress beyond the plan stage, either because they were not interested in receiving services or did not follow through with programs proposed for them.

In short, forty-nine (49) percent of the cases were served and fifty-one (51) percent were not. A success ratio of thirty-eight (38) percent of the total caseload would appear to be gratifying. If we apply this ratio to cases served, it increases to seventy-four (74) percent.

A final review of the Plan C caseload reveals the following closure tabulation of Intensive Service cases by official status and category. (45 cases were assigned to this category):

Number	VR Status	FOR Category	Percent
22	26	Adequate Soc. Performance	49%
13	28	Non-Cooperative	29%
2	28	Death	4%
6	30	Non-Cooperative	14%
2	30	Inability to Contact	4%

A more descriptive listing of the non-successful cases follows:

Number	VR Status	Reason	Percent
7	28	Reincarcerated or Fugitive	16%
3	30	Reincarcerated or Fugitive	6%
10		(Sub-Totals)	22%
6	28	Loss of Contact	14%
5	30	Non Interested	11%
11		(Sub-Totals)	25%

In summary, the following might be noted:

- Forty-nine (49) percent of the cases assigned was successful.
- Four (4) percent died while in active status.
- Twenty-two (22) percent of the cases failed from the standpoint of presently being in violation of the law, but only sixteen (16) percent of the total assignment received services and also resulted in failure.
- We do not know the outcome of twenty-five (25) percent of the caseload. So far as we can tell at this point these clients are not afool of the law, but we are not in contact with them. In this category, fourteen (14) percent of the total caseload received services without known result, that is, without success measurement being completed within the stringent FOR closure criteria. Also in the unknown category, eleven (11) percent of the total cases assigned did not progress beyond the plan stage, either because they were not interested in receiving services or did not follow through with programs proposed for them.

In short, eighty-two (82) percent of the cases assigned were served and eighteen (18) percent were not.

A success ratio of forty-nine (49) percent of the total caseload (randomly assigned from the recidivistic population of a close custody institution) would appear to be gratifying. If we apply this

ratio only to cases served, it increases to fifty-nine (59) percent.

In looking at the results of both plans, it should be remembered that the Project did not operate with referred clients, that these clients did not come seeking services, and that both caseloads were created by random assignment.

A glance should also be taken at FOR closure criteria for successful cases. First, a client had to remain in stable employment for at least six (6) months (instead of the customary thirty (30) days), and, of course, avoid further felony convictions during that period. Actually clients were followed for even longer periods, usually a year or more. Then, once these conditions had been satisfied, determining what constituted "Adequate Social Performance" became a pretty subjective business. In final case staffing, the Project Director, the counselors, the appropriate correctional officers and the consulting staff attempted to answer questions very much like the following.

Does the client make enough money to meet the basic needs of his family, if he has one, and still have a reasonable and relative margin left over for amusement and luxury items?

Can the client realistically aspire to advancement in the future?

How does the client seem to estimate his position in the main stream of the good American life? Is he apparently satisfied with his own vocational image? Does he think he now has as much status as he did as a crook, making a fast dollar and spending it lavishly?

Has the client really made use of the VR services provided to him? Or has he taken advantage of any other available community resources?

Is the client making use of his vocational strengths or is he occupied consistent with training received during the correctional process?

How does the client react to stress, big or small? And how does he seem to handle anger?

Is there evidence of a serious drinking problem or has the client been arrested two or more times, particularly recently on these demerit charges?

What other indications are there that the client has reintegrated into the community?

What attitudinal changes were observed during, or as a result of, the rehabilitation process?

IV. Implications for Change

A. Change Necessary in Agencies

1. The following services that are not normally available now should become a part of VR and/or corrections: (2) the multi-disciplined team approach to evaluation and treatment programs, (b) the provision of several medical services beyond the present scope of most correctional institutions, (c) adjustment training, (d) family contact and counseling, (e) community resource orientation and referral, (f) arrangement for legal counsel on civil matters as needed, (g) more liberal policies for providing emergency funds for basic maintenance, and (h) more extensive follow-up. It is strongly recommended that a stepped-up program of employer orientation be developed.

2. Vocational Rehabilitation in combination with corrections, can offer the services necessary to rehabilitate offenders. However it is a basic premise of the Atlanta Project that traditional VR and correctional services are really secondary to effecting behavior modification and that no lasting results can be achieved without some attitudinal change on the part of the offender clients. In this light, our consensus is that the two most significant services needed by offender clients are intensive counseling and psychotherapy, primarily group therapy. Yet these services are not as readily available as it might seem, for the first requires trained counselors and an enlightened approach to maintaining caseloads at manageable size, while the second presently suffers from a shortage of behavioral scientists interested in working with public offenders. The multi-disciplined team approach to client evaluation and the staffing of case problems is highly desirable and should be utilized whenever possible. Here again, however, trained professional staff members are limited in number, and those that might be available are expensive.

Thought should be given toward enlisting the assistance of professional social workers. Although she was not available during the life of the FOR Project, a full-time social worker is employed by VR in the Atlanta District and is just now beginning to work with counselors serving public offenders. It is anticipated that she will be most helpful in the areas of marital counseling and family budgeting.

The next paragraph will touch upon a vital need, the development of systems for making out-of-state deferrals.

3. Some degree of change in VR policy is certainly indicated in working with offender clients, particu-

larly inmates of federal institutions, who by and large are not natives of the host states in which these institutions are located. Although recently federal regulations have eliminated residency as a VR eligibility criterion, this by no means necessitates the conclusion that all states will begin to work with these clients. The problems of money and the recruitment and development of staff certainly enter into the picture. Also, it would seem that some sort of production reward system would have to be developed before VR state agencies in general would become interested in working with non-residents. Although interest in correctional rehabilitation is rapidly growing throughout the country, there are still areas in the nation that are simply not interested in working with public offender clients and it is believed that all VR agencies could benefit from more extensive orientation in the resocialization potential of offenders in general.

4. While the level of quality in federal correctional personnel is high, it is regrettably very low in most state correctional systems, particularly in the South, where even illiteracy does not always offer a deterrence to securing a position as a custodial officer. It is doubtful that this woeful situation will be greatly alleviated until something is done toward adjusting salary range. The coordination of multiple agency staff is also difficult to establish and the process is usually a long one. A beginning might be made through the inception of forums or task forces designed for the mutual exchange of information and the understanding of goals, philosophies and the like.
5. In general, the most gratifying client to work with under any condition was the offender who seemed genuinely willing to fulfill his potential. It might also be said in general, that those clients willing to participate in group psychotherapy were much easier to work with on a meaningful level than those that did not. Given a realistic appraisal of VR philosophy, it might finally be noted that the client who has developed vocational skill in some area offers VR its greatest chance for success, all other things being equal.

B. Implementation of Change

1. So much depends upon the funding and development of staff. If Georgia's ambitious plans for the future were indeed to be implemented, by 1975 VR would be working in close conjunction with some 18 major units and "systems" of the state and federal correctional agencies operating in the state. Even so, only about one-third of the offender population would be reached by VR services.

In striving toward this essentially conservative goal, an initial mission will be to convince the diverse correctional systems of Georgia that, based on FOR findings, public offenders, even those with established patterns of recidivism, **can** be rehabilitated and that VR participation in the correctional process can be integral to success.

As this orientation process is gradually accomplished, it is hoped that the following suggestions will be realized:

- a. Hold a conference or institute on the rehabilitation of public offenders with the various correctional agencies and universities represented.
 - b. Convene a task force of administrators from the various interested agencies to further discuss plans for the future, emphasizing the positive findings from the use of the multi-disciplined team approach.
 - c. Convene a coordinating committee of administrators for the refinement of cooperative operations.
 - d. Develop and revise cooperative agreements, outlining areas of eligibility for services and referral procedures.
 - e. Emphasize the need for sensitivity training for the personnel of all involved agencies and develop reciprocal training programs.
 - f. Activate a closer sharing of records among the agencies.
 - g. Hold citizens councils on the rehabilitation of public offenders.
 - h. Focus informational publication on the rehabilitation of public offenders.
2. If sound communication is developed among top level administrators of the various agencies, then it should not be overly difficult to apply our findings always, however, bearing in mind the limitations of funding and staffing. It might be noted that Georgia presently enjoys a positive attitude toward prison and correctional reform. The relationship between VR and the Federal agencies is already established.
 3. Disseminating project findings within our own agency is naturally of vital importance since agency approval would have to be secured before any of them can be applied. In each event we have found it to be most profitable when our top administrators were able to meet with the Executive Committee, and we hope to be able to make liberal use of the committee in promoting implementation. Once administrative approval on given proposals has been obtained, a team, composed of FOR participants will hopefully be able to provide orientation to field staff during periodic district conferences

and other similar occasions. It is also hoped that individual consultation by former FOR staff members will be available upon request to personnel of ongoing programs.

V. Summary

A. Realizations

Our most gratifying reward was found in the realization that public offenders, even recidivists, **can** be rehabilitated—both realistically and profitably.

A premise basic to our project is that traditional purchased VR services, such as physical restoration and training, are secondary to effecting behavior modification; nothing lasting can be accomplished without some attitudinal change within the offender client.

Therefore the two most significant services provided were supportive counseling and group psychotherapy. While it was difficult to convince ourselves for awhile that we were actually being effective, caseload results and client interviews (conducted by the Project Observer) after closure and near the end of the study led us to the firm conviction that we did in fact accomplish attitudinal change in a significant majority of our success cases.

Although the counseling process (as apart from formal psychotherapy) is extremely difficult to describe, we have termed its most singular characteristic "action therapy". This might be defined as communication of the counselor's sustained concern for the client's problems (despite periods of frustration) and an awareness of the client's values as a unique human being; and its definition should also include mention of immediacy in providing service, or crisis intervention, or meeting emergency needs as they arise with the client's convenience in mind rather than the Agency's or the counselor's. In other words, the shop was open for business on weekends and after hours when necessary.

In working with clients prior to release from prison, the advantages of Plan C were altogether apparent. Opportunity was afforded to provide group psychotherapy during incarceration and to develop workable client—counselor relationships prior to discharge, and thus the rehabilitation continuum was already in operation during the immediate post-release period, thereby eliminating the detriment of delayed service during this critical stage of the correctional process.

The provision of an imprest bank account was invaluable, in fact vital in meeting emergency financial needs such as housing and basic maintenance.

The value of working with the family as a unit rather than just the client was amply demonstrated, and it gave rise to the consideration of enlisting the assistance

of social workers, particularly in the areas of marital counseling and family budgeting.

A highly effective employment was the multi-disciplined team approach to both diagnostics and treatment. In addition to VR, the Project Executive Committee was composed of representatives from corrections, psychiatry, psychology and sociology. These, then, are the salient findings of the Atlanta Project as they relate to our given purposes. Specific recommendations will be found in the sections following.

B. Recommendations

1. For Application of the Findings
 - a. In the belief that supportive counseling is vital to the rehabilitation-resocialization process, it is strongly suggested that caseloads be maintained at manageable size.
 - b. Comprehensive psychological services should never be neglected in favor of the more easily identified vocational services.
 - c. Emergency services must be flexible and provided immediately at the point of need. Rigidity of rules, regulations and policies creates the danger of case failure in working with the offender client. Despite possible conflict with traditional practice, the offender must often be served at his convenience rather than that of the helping agency.
 - d. In prisoner cases services should begin during incarceration and be continued with little or no interruption into the free world.
 - e. An approach should be made toward consideration of the client's total environment. The family should be treated as a unit, rather than simply providing services to the client alone.
 - f. Thorough vocational evaluation should be attempted in each case. It should never be lightly assumed that an offender's expressed occupational preferences are commensurate with either his assets or liabilities. However even with comprehensive evaluation developed into apparently realistic rehabilitation plans, a relatively high degree of vacillation in vocational objectives should be anticipated.
 - g. Staff members and agencies working with public offenders should be prepared for unique setbacks and case failures, but success in this field is particularly rewarding.
 - h. The multi-disciplined approach to diagnostics and treatment should be used whenever possible.
 - i. A realistic approach toward the determination of what constitutes adequate social performance should be used.

- j. Staff members of VR should receive training and orientation in cooperation with the involved correctional institutions and agencies. The importance of sensitivity training should be stressed.
- k. Close relationships among cooperating agencies must be maintained, and mutually agreeable cooperative contracts should be developed.
- l. Efforts should be constantly made to educate the public on matters pertaining to correctional rehabilitation.
- m. In point of summary, the following services are suggested as most pertinent to the rehabilitation-resocialization process:
 - (1) Diagnostics
 - a. Medical
 - b. Psychological and/or Psychiatric
 - c. Vocational
 - d. Sociological
 - (2) Evaluation
 - a. Psychological Objective
 - b. Medical Objective
 - c. Vocational Objective
 - d. Educational Objective
 - e. Sociological Objective
 - (3) Classification

It is suggested that the team approach be used during institutional intake. Then the pertinent VR counselor should bring the evaluation findings of the team to the institutional classification committee for final decision and action.
 - (4) Counseling
 - (5) Psychological or Psychiatric Services
 - (6) Medical Services
 - (7) Family Services
 - (8) Vocational Training
 - (9) Academic Training
 - (10) Adjustment Training
 - a. Personal
 - b. Work
 - c. Social
 - (11) Coordination of Release Planning with the Client's Family

- (12) Basic Maintenance Pending Receipt of Income
- (13) Job Placement
- (14) Occupational Tools
- (15) Community Referral Services
- (16) Clothing
- (17) Housing
- (19) Arrangements for Legal Counsel on Civil Matters
- (19) Follow-Up
- 2. For Further Research

The following suggestions for further research, drawn from a proposal previously submitted to the National Institute of Mental Health, are offered as pertinent to Georgia.

 - a. Establish descriptive baseline data regarding the typical flow of potential VR clients through the correctional institutions and agency programs operating cooperatively with the Office of Vocational Rehabilitation.
 - b. Demarcate and describe reliably the different aspects of VR activities in these various institutions and with these various agencies.
 - c. Develop and test-out further criteria (both within prison and after release) which reflect change in the behavior of public offenders.
 - d. Relate specific outcome criteria to more general outcomes of the total experiences of clients at these institutions and with these agencies.
 - e. Identify characteristics of clients who are most likely to benefit from specific VR experiences and also identify characteristics of clients most likely to be hindered by specific VR experiences.
 - f. Evaluate rehabilitation process variables with reference to their effects on VR clients and on the cooperating institutions and agencies.
 - g. Further develop criteria for measuring positive client change both within prison and during post-release adjustment.

Note:

All activities of the Atlanta Federal Offenders Rehabilitation Project terminated on May 31, 1969, in accordance with predetermined design and the provisions of the extended Third Grant Period.

Special Note on the Appendices

We are extremely pleased to present the analytical report on Project activities in group psychotherapy by Dr. Earl D. C. Brewer, Chief Project Consultant, Consultant in Research and Sociology, Emory University, Atlanta, author of "A Vocational Rehabilitation Study of Prisoners, Probationers and Parolees," published in 1964 and of considerable impact upon the inception of the national Federal Offenders Rehabilitation Program (Appendix A).

Perhaps the essence of the project can best be found in the reports of Dr. Don Chandler, Project Observer and Consultant in Sociology, West Georgia College, who interviewed a sampling of our closed cases, both those tagged as successful and those terminated as failures (Appendix B). In this instance, Dr. Chandler was commissioned to find out what our clients thought

of us and the Project in general. Since he probed for their reactions months after case closure, when services were no longer being offered, it seems reasonable to assume that they did not revert to "con artistry" and that their expressions were evidently genuine. In addition to Dr. Chandler's summary two of his individual reports are added for punctuation.

The report on our sub-project involving out-of-state referrals (Appendix C) may not be of particular moment since: (1) it was not particularly successful and (2) its interest is primarily directed toward rehabilitation agencies engaged in cooperative programs with federal, not state, penal institutions. Its premiere implication is that a similar study conducted on a more elaborate basis should produce more substantive results.

APPENDICES

APPENDIX A

A Study of the Effectiveness of Group Therapy with Federal Offenders

The purpose of this part of the report is to review the relationships of group therapy as one of the rehabilitative services available to intensive clients. At the beginning of the project, the plan was to have a psychiatric screening of each intensive client in both Plan A and Plan C. The group of clients recommended for therapy would be randomly divided into a therapy and a nontherapy, "control" (1) group. Because of the difficulty of persuading clients to participate in group therapy, this design was abandoned. A pragmatic substitute was to get as many intensive cases into group therapy as possible. Following this, an equal number of intensive cases would be randomly selected as a nontherapy "control" group. Using the data collected in the national research design for the project(2), differences and similarities between those receiving group therapy and those not receiving it could be made.

Through this process, 29 of the 107 intensive cases in both Plan A and Plan C were involved in group therapy. This included 14 of the 62 intensive cases of Plan A and 15 of 45 intensive cases in Plan C. For the 78 intensive cases not receiving therapy, a sample selection of 29 (14 Plan A and 15 Plan C) was drawn as a "control" group for comparison with the 29 therapy clients.

In Appendix I, a general comparison of these groups may be made. Although random variations in these characteristics would be expected, the similarities are obvious. The modal or bimodal distribution, with few exceptions, is identical for the three groups. For example, in Item I, Class IV and Class VII offenses provide a bimodal distribution across the three groups. The same is the case in Item 3 with age at first commitment being over 20 or no prior commitment. In Item 7, the modal age distribution was between 30 and 40 years. In Item 9, the modal educational level was between 9 and 12 grades. Thus, there would seem to be no detectable biasing factor in the characteristics of the therapy and nontherapy control groups. Indeed, there were more differences within the therapy clients of Plan A and Plan C than between the other groups. This shows up, for example, in total number of arrests (Item 4) and number of prior commitments (Item 6). This would be expected since at the beginning of the

project those in Plan C were institutionalized while most of those in Plan A were probationers.

From this point, the report will be based upon a comparison of the therapy and "control" nontherapy cases. Because of the small numbers involved, the therapy clients of Plan A and Plan C have been combined. The nontherapy clients include a random selection of 14 from Plan A and 15 from Plan C.

Two tests of significance of differences have been used in this analysis. The sign test(3) was used primarily to evaluate the changes occurring in the responses of each client on a matched paired before-and-after basis. In the tables, changes in the hypothesized direction were indicated by plus (+) signs and those in the opposite direction by minus (—) signs. Non-changes were not used in the test. The Z values of the positive and negative changes were tested by the probability of occurrences given by the binomial distribution. The more even the distribution of positive and negative changes, the more likely the changes were due to chance factors rather than directional input factors. The greater the difference between the positive and negative changes, the greater the probability that changes were not due to chance.

The chi-square (X^2)(1) was used as a test of significance of differences applied to the changes of the total group rather than the total of the changes for each matched paired response. The size of the chi-square reflected the differences in the numbers involved, that is in the changes. Hypotheses were considered confirmed, if the changes were in the hypothesized direction and large enough to be statistically significant at the .05 level of probability in either test.

The hypotheses being tested by these two methods were derived from the general purposes of the project and stated within the specific limitations of the data. The basic idea was that if the group therapy subproject had been helpful in achieving FOR objectives, there would have been significantly more changes along the hypothesized lines in the therapy than in the nontherapy group.

The differences between the recommendations of counselors and therapists before and after therapy may be seen in Table 1.

(1) This should not be confused with the control groups in the project as a whole. This report deals only with intensive cases.

(2) Appreciation is expressed to Mrs. Merlyn Matthews, Research Director of FOR, for use of this data.

(3) Sidney Siegel, *Nonparametric Statistics*. New York: McGraw Hill Book Company, Inc., 1956, pp. 68-75.

TABLE 1. EVALUATION OF INTENSIVE CASES RECEIVING THERAPY^(a) BY VOCATIONAL REHABILITATION COUNSELORS AND THERAPISTS, FOR, ATLANTA PROJECT, 1969.

Item	Total		Plan A		Plan C	
	Couns.	Therap.	Counselor	Therapist	Counselor	Therapist
Before therapy						
Recommended	27	24	14	11	13	13
Not recommended	2	4	—	3	2	1
No information	—	1	—	—	—	1
After therapy						
Favorable	18	10	8	5	10	5
Made no difference	6	11	4	2	2	9
Uncertain	5	4	2	3	3	1
No information	—	4	—	4	—	—
Chi-square test of difference of "after" therapy evaluations						
			Counselor	Therapist		
Favorable			18	10		
Unfavorable			11	19		

$$X^2 = 3.38 \quad df = 1 \quad p = .05$$

(a) Of the 29 intensive cases in the "control" group not receiving therapy 18 were recommended for therapy by the VR counselor and 11 not recommended. Of the 49 other intensive clients without therapy, 37 were recommended and 12 not recommended. Lack of availability was the principal cause given for nonparticipation in therapy.

(1) Morris Zelditch, Jr., *A Basic Course in Sociological Statistics*. New York: Henry Holt and Company, 1959, pp. 271-291.

Hypothesis 1. VR counselors will evaluate the results of therapy more favorably than therapists.

The chi-square test is not significant at the .05 level of probability and does not support this hypothesis. The differences in the "before" therapy recommendations were not nearly as great as the "after" therapy judgments. Because of the small number of cases, it has not been feasible to limit the comparisons below only to the ten therapy cases evaluated by the therapists as favorable. If this is a test of a group therapy process itself, the inclusion of the total therapy group would seem justified. Incidentally, in spite of the greater difficulty of arranging for the group therapy in the noninstitutional setting of Plan A, the evaluations of results were similar.

The major reasons for the removal of clients from the active case load may be seen in Table 2.

TABLE 2. NUMBER OF THERAPY AND NONTHERAPY CLIENTS BY REASONS FOR REMOVAL FROM ACTIVE CASELOAD, FOR, ATLANTA PROJECT, 1969.

Reasons	Therapy	Nontherapy
Inability to locate or establish contact	—	3
Noncooperative	6	14
No need	—	1
Postponement	—	1
Death	2	—
Adequate social performance	16	7
Chi-Square test of difference		
Adequate performance	6	7
Inadequate	8	18

$$X^2 = 5.88 \quad df = 1 \quad p = .02$$

Hypothesis 2. Therapy clients will show more adequate social performance at closure than nontherapy clients.

The chi-square is significant at the .02 level of probability, and this hypothesis is confirmed. Seven of the ten favorable therapy cases were included in the adequate social performance group, and 2 cases were not closed.

Employment at closure is a significant indication of the success of the process.

TABLE 3. NUMBER OF THERAPY AND NON-THERAPY CLIENTS BY WORK STATUS AT ACCEPTANCE AND AT CLOSURE, FOR, ATLANTA PROJECT, 1969.

Work Status	Therapy		Nontherapy	
	Accept.	Closure	Acceptance	Closure
No reply, not appropriate	12	4	11	8
Competitive labor market	8	15	6	10
Self-employed	—	2	—	2
Not working	4	3	9	6
Sign test of differences				
+	12		9	
—	3		3	
Probability	.018 (S)		.073 (NS)	

Hypothesis 3. Therapy clients will show more increases in jobs from acceptance to closure than nontherapy clients.

The number of positive changes toward employment was greater for the therapy than the nontherapy group. The sign test was significant for the former but not the latter. The hypothesis is confirmed. Of those making positive changes during the project in terms of employment, five of the ten favorable cases in therapy were included, two cases were not yet closed, and two were employed at both periods.

Incidentally, similar information on employment was collected nine months after acceptance and two years later (or at the end of the project). The test of changes of these data was not significant. Apparently, clients had secured jobs earlier than nine months or after two years. These data suggest the former.

TABLE 4. NUMBER OF THERAPY AND NONTHERAPY CLIENTS BY AMOUNT OF EARNINGS IN THE WEEK BEFORE ASSIGNMENT AND PRIOR TO CLOSURE, FOR, ATLANTA PROJECT, 1969.

Amount	Therapy		Nontherapy	
	Acceptance	Closure	Acceptance	Closure
No reply	2	2	3	9
None	16	4	18	5
Under \$10	—	—	—	—
\$10-19	—	—	—	—
\$20-39	—	—	1	1
\$40-59	2	—	—	—
\$60-79	3	2	1	3
\$80-over	1	16	3	8
Sign test of differences				
+	18		9	
—	2		2	
Probability	.001 (S)		.033 (S)	

Hypothesis 4. Therapy clients will show more increases in earnings from acceptance to closure than nontherapy clients.

There were significant changes in the amounts of earnings for both therapy and nontherapy clients. However, these changes were much greater among therapy clients, and the hypothesis is confirming. Of the 18 positive changes in the therapy group, seven were made by the ten who completed therapy with favorable reports, and two cases were not yet closed.

Again similar data after nine months and two years showed no significant difference.

In Table 5 the types and costs of case services and the number of hours of counseling may be studied. The following hypotheses are tested by these data.

Hypothesis 5.1. Therapy clients will receive more case services than nontherapy clients.

TABLE 5. NUMBER OF THERAPY AND NONTHERAPY CLIENTS BY COST AND TYPES OF CASE SERVICES RECEIVED, FOR, ATLANTA PROJECT, 1969.

Cost	Diagnostic		Surgery		Prosthetic		Hospitalization		Training		Maintenance		Tools	
	T(1)	NonT(2)	T	NonT	T	NonT	T	NonT	T	NonT	T	NonT	T	NonT
No reply, none.....	1	22	8	25	17	24	21	25	21	26	13	16	8	18
Under \$50	13	1	—	—	6	—	—	—	—	—	—	2	—	3
\$50-99	5	1	3	—	1	—	—	—	1	—	—	1	4	3
\$100-149	2	—	1	—	—	1	1	—	—	—	1	1	3	2
\$150-199	1	1	2	—	—	—	1	—	—	—	2	2	—	—
\$200-249	—	—	2	—	—	—	—	—	—	—	2	—	1	—
\$150-299	1	—	1	—	—	—	—	—	—	—	1	1	—	—
\$300-349	—	—	—	—	—	1	—	—	—	—	—	—	—	—
\$350-399	—	—	3	—	—	—	—	—	1	—	1	—	2	—
\$400-over	1	1	4	1	—	—	1	1	1	—	4	3	6	—

Clients	HOURS OF COUNSELING							
	No reply	None	1-9	10-19	20-29	30-39	40-49	50-59
Therapy(1)	—	—	—	4	2	5	5	3
Nontherapy(2)	1	2	4	10	6	1	1	1

(1) N = 24 for therapy clients.

(2) N = 26 for nontherapy clients.

Chi-square test of difference	Therapy	Nontherapy
Total receiving specified case services	79	26
Total not receiving specified case services	89	156

$X^2 = 43.04$ $df = 1$ $p < .001$ (S)

The relationship between those receiving case services and therapy is very great indeed. Hypothesis 5.1 is confirmed.

Hypothesis 5.2. Therapy clients will receive more expensive case services than nontherapy clients.

Chi-square test of difference	Therapy	Nontherapy
Under \$200	136	174
\$200 and over	32	8

$X^2 = 17.11$ $df = 1$ $pp < .001$ (S)

Apparently those who were induced into therapy were also provided more expensive case services than those who were not. The hypothesis is confirmed.

Hypothesis 5.3. Therapy clients will receive more hours of VR counseling than nontherapy clients.

Chi-square test of difference	Therapy	Nontherapy
Under 30 hours	6	23
30 hours and over	18	3

$X^2 = 18.11$ $df = 1$ $p < .001$ (S)

Hypothesis 5.3 is true. Persons who receive therapy also received significantly more hours of counseling by the vocational rehabilitational counselor.

TABLE 6. NUMBER OF THERAPY AND NONTHERAPY CLIENTS BY IMPROVEMENT IN PERFORMANCE IN THE OPINION OF COUNSELORS, FOR, ATLANTA PROJECT, 1969.

Improvement in performance	Therapy clients (N-24)	Nontherapy clients (N-26)
1. Making good use of abilities	15	6
2. Profited from use of vocational training	5	—
3. Profited from use of VR services	16	7
4. Profited from other community resources	10	5
5. Client making sufficient income to support himself and family without problems	15	6
6. Client making sufficient income to support himself and family with some luxuries	14	6
7. Client can expect advancement on job	12	4
8. Client satisfied with his general status	13	6
9. Client reacting well to stress, handles anger	16	7
10. Client not relying on crutches, such as alcohol or drugs	15	7
11. Avoiding problems with law	15	7
12. Client is part of his community's activities	7	2
Chi-square test of difference		
Total improvements (1-12)	153	63
Total nonimprovements (1-12)	135	249
$X^2 = 69.07$ $df = 1$ $p < .001$ (S)		

Hypothesis 6. Therapy clients will show more improvements in performance, in the opinions of VR counselors, than nontherapy clients.

In the opinions of counselors, the therapy group came out far ahead of the nontherapy group in terms of improvements in performance along 12 specific lines. Indeed, there was no case where nontherapy clients exceeded therapy clients in these improvements. The hypothesis is confirmed.

TABLE 7. NUMBER OF THERAPY AND NON-THERAPY CLIENTS BY REGULAR CONTACT WITH PROBATION/PAROLE AND VOCATIONAL REHABILITATION OFFICERS AFTER NINE MONTHS AND AFTER TWO YEARS (OR AT END OF PROJECT), FOR, ATLANTA PROJECT, 1969.

Contact	Therapy		Nontherapy	
	After nine months	After two years	After nine months	After two years
No reply	1	—	—	—
Yes, P/P officer only	—	1	4	—
Yes, P/P officer and VRO	11	5	4	2
Yes, VRO officer only	3	9	4	7
No last contact	6	6	14	17
Death	—	—	—	—
Sign test of differences				
+	5		2	
—	3		4	
Probability	.363 (NS)		.344 (NS)	

Hypothesis 7. Therapy clients will show more increases in regular contacts during the project than nontherapy clients.

There were no significant changes from the nine-month to the two-year reports. The hypothesis was disconfirmed. However, it should be noted that significantly more therapy than nontherapy clients maintained regular contacts at both of these periods of time in the project.

TABLE 8. NUMBER OF THERAPY AND NON-THERAPY CLIENTS BY VIOLATION OF PAROLE OR PROBATION, AFTER NINE MONTHS AND AT END OF PROJECT (OR AFTER TWO YEARS), FOR, ATLANTA PROJECT, 1969.

Violation	Therapy		Nontherapy	
	After nine months	After two years	After nine months	After two years
No reply	—	3	3	3
Not violated	18	14	17	15
Violated but not revoked	—	1	4	2
P/P revoked for administrative violation	2	2	—	—
P/P revoked for new offense	—	1	1	1
At large, expect to revoke	1	—	1	2
Sign test of differences				
+	5		4	
—	5		3	
Probability	.109 (NS)		.500 (NS)	

Hypothesis 8. Therapy clients will show more decreases in violations during the project than nontherapy clients.

There were more negative than positive changes, but the differences were not significant. The hypothesis

is rejected. There were relatively few violations reported for either group during either period.

TABLE 9. NUMBER OF THERAPY AND NONTHERAPY CLIENTS BY NUMBER OF CUSTODY COMPLAINTS, AFTER NINE MONTHS AND AT END OF PROJECT (OR AFTER TWO YEARS), FOR, ATLANTA PROJECT, 1969.

Custody Complaints	Therapy		Nontherapy	
	After nine months	After two years	After nine months	After two years
No reply	—	2	—	4
None	17	16	23	18
1	2	1	3	4
2	—	1	—	—
3	1	1	—	—
Sign test of differences				
—		4		7
+		4		2
Probability	.637 (NS)		.090 (NS)	

Hypothesis 9. Therapy clients will show more decreases in custody complaints during the project than nontherapy clients.

There were no significant changes, and the hypothesis is rejected. However, the majority of both groups had no custody complaints during either period.

TABLE 10. NUMBER OF THERAPY AND NONTHERAPY CLIENTS BY ARRESTS FOR ILLEGAL ACTIVITY AFTER NINE MONTHS AND AT END OF PROJECT (OR AFTER TWO YEARS), FOR, ATLANTA PROJECT, 1969.

Arrests	Therapy		Nontherapy	
	After nine months	After two years	After nine months	After two years
No reply	—	3	7	8
No	16	11	13	14
Yes	5	7	6	4
Sign test of differences				
+		2		6
—		5		3
Probability	.227 (NS)		.254 (NS)	

Hypothesis 10. Therapy clients will show more decreases in arrests for illegal activities during the project than nontherapy clients.

There are no significant changes for either group, and the hypothesis is rejected.

Thus, no significant changes were detected in any of the characteristics reported after nine months and after two years. Either, reporting at these times was not adequate, this period of time in the project was not significant, or group therapy made no significant difference in regard to these characteristics. An indication that the latter may not be the case grows out of the fact that the data on jobs (Table 3) and earnings (Table 4) showed significant differences between acceptance and closure but not between the nine-month and two-year reports.

In summary, excepting partially the data based upon the nine-month and two-year reports, positive, significant differences were found for all the characteristics tested between the performance of the therapy clients and the nontherapy clients. Whether the

therapy itself was the major causative factor involved, or whether the same factors which resulted in these clients going into group therapy also produced more positive results in line with the objectives of the FOR project remains uncertain. In any case, the subproject

on group therapy, in spite of the problems involved, especially in noninstitutional settings, has yielded tentative test results which are significant enough to be followed up in further evaluation of innovative practices for the rehabilitation of public offenders.

APPENDIX I. NUMBER OF THERAPY AND NONTHERAPY CLIENTS BY SELECTED CHARACTERISTICS, FOR, ATLANTA PROJECT, 1969.

Item	Therapy Clients (N-29)	"Control" Non-therapy Clients (N-29)	Other Non-therapy (N-49)	Therapy Clients (N-14) Plan A	Therapy Clients (N-15) Plan C
1. Offense classifications					
Class I (fraud, embezzlement)	1	1	—	1	—
Class II (other fraud)	1	—	—	1	—
Class II (liquor, internal revenue)	5	2	4	2	3
Class IV (larceny, theft, postal fraud, forgery)	9	12	13	5	4
Class V (assault, homicide)	2	1	1	—	2
Class VI (counterfeiting, burglary, interstate transportation of stolen property, marijuana, national defense laws)	1	6	7	1	—
Class VII (auto theft)	10	7	21	4	6
Class VIII (narcotics, robbery)	—	—	3	—	—
2. Age at first arrest					
No reply	—	1	1	—	—
Under 16	2	2	7	1	1
16-17	7	10	7	1	1
18-20	7	4	12	4	3
21-24	5	8	11	2	3
25-over	8	4	11	6	2
3. Age at first commitment					
No reply	—	1	1	—	—
No prior commitment	12	9	19	11	1
Under 16 years	—	1	4	—	—
16-17	4	2	2	1	3
18-20	2	6	4	—	2
Over 20	11	10	19	2	9
4. Total number of arrests					
No reply	—	1	1	—	—
1-2	8	1	10	8	—
3-4	1	5	12	1	—
5-8	8	13	8	3	5
9-12	8	2	7	2	6
Over 12	4	7	11	—	4
5. Longest single time free since first commitment					
No reply	—	1	1	—	—
No prior commitment	12	9	20	11	1
Under 6 months	1	2	3	—	1
6-18 months	5	6	7	—	5
18-36 months	5	6	9	1	4
36-60 months	1	1	2	—	1
Over 60 months	5	4	7	2	3
6. Total number of prior commitments					
No reply	—	1	—	—	—
None	11	9	20	11	—
1	3	2	11	1	2
2	4	6	4	1	3
3	2	6	2	—	2
4	3	1	2	—	3
5	1	4	1	—	1
6 or more	5	—	9	1	4
7. Age					
50-over	2	4	3	2	—
40-49	11	9	13	2	9
30-39	12	10	18	6	6
Under 30	4	6	15	4	—
8. Race					
White	20	19	35	10	10
Negro	9	10	14	4	5
9. Education					
No reply	—	1	—	—	—
Under 4 grades	1	—	2	—	1
5-8 grades	10	9	19	2	8
9-12 grades	14	18	22	8	6
13 grades and over	4	1	6	4	—
10. Age at completion of education					

No reply	1	2	8	—	1
Under 15	7	4	13	1	6
16-19	17	22	24	9	8
20-over	4	1	4	4	—
11. Health					
No reply	—	1	5	—	—
Satisfactory	21	15	31	12	9
Remediable defect or disease	4	5	5	—	4
Permanent defect or disease	4	8	8	2	2
12. Marital status					
Single	6	5	11	4	2
Married	12	12	21	6	6
Divorced	4	5	7	2	2
Separated	4	2	6	2	2
Widow(er)	1	—	—	—	1
Common-law	2	5	4	—	2
13. Number of dependents					
None or no reply	12	12	23	8	4
1	5	2	6	4	1
2	3	7	8	—	3
3	3	5	5	1	2
4	1	3	6	—	1
5 or more	5	—	1	1	4
14. Stability of behavior, number of marriages					
No reply	6	7	12	4	2
1	12	10	24	7	5
2	8	6	9	2	6
3 or more	3	6	4	1	2
15. Duration of last marriage					
No reply	12	14	15	5	7
Under 1 year	2	1	2	2	—
1-3 years	7	4	10	3	4
3-7	3	3	7	1	2
7-10 years	2	3	5	2	—
10 or more years	3	4	10	1	2
Employment					
16. Number of jobs outside					
No reply	7	11	8	2	5
None	1	1	3	1	—
1	8	6	11	5	3
2	6	5	10	2	4
3	4	4	10	2	2
4	3	1	2	2	1
5 or more	—	1	5	—	—
17. Duration of longest job outside					
No reply	7	14	15	2	5
None	—	1	1	—	—
Less than 4 months	4	2	—	2	2
4-6 months	3	—	8	1	2
7-9 months	1	2	1	—	1
10-12 months	3	—	5	1	2
13-21 months	1	3	2	1	—
22-24 months	10	7	17	7	3
18. Classification of last job					
No reply	2	4	3	1	1
Professional	1	1	5	—	1
Clerical, sales	7	3	8	5	2
Service	8	3	10	5	3
Farming	1	1	2	—	1
Industry	7	10	12	2	5
Unskilled labor	3	7	9	1	2
19. Residence (No. in last 2 years in community)					
No reply	11	16	21	6	5
1	9	9	14	3	6
2	5	2	7	3	2
3	4	2	6	2	2
4 or more	—	—	1	—	—
20. Church affiliation					
No reply	9	9	7	2	7
Active member	6	4	12	4	2
Member, no active	10	8	13	7	3
Attended as a child	4	6	10	1	3
Nonmember	—	2	7	—	—
21. Alcoholism					
No reply	10	8	14	3	7
Nonuser	2	4	1	2	—
Social	12	9	19	7	5
Alcoholic problem	5	8	15	2	3

APPENDIX B

Observer's Summary Report Atlanta FOR Project

The objective behind this report is to call attention to some of the features of the Atlanta project which may not show up in the statistical reports. The two items to be discussed in particular are the executive meetings and the comments of the intensive clients made to the observer during interviews in the closing months of the project.

The executive meetings were held, with few exceptions, on a monthly basis throughout the research period. Members of the committee represented vocational rehabilitation, the federal probation system, federal prisons, and, on a consultant basis, the fields of psychology, psychiatry, and sociology. Guests from appropriate fields were invited to specific meetings.

The stated purpose of the executive meetings was to provide for the planning and administration of the Atlanta FOR Project; however, much more than this occurred.

The regular sessions became the meeting ground of the key officials of the three agencies represented on the committee, plus other agencies whose representatives were invited to specific meetings. Lines of communication were established that had not existed before, even though the agencies had worked together in many ways.

The committee, with its diversity of membership, became a support base for change in treatment of federal offenders. A number of innovations were introduced that would never have been attempted without the support of the committee.

Specific cases were staffed which provided the counselors with the advantage of a diversity of points of view applied to the solution of rehabilitation needs.

On several occasions the committee members sensed the inadequacy of certain honored practices in meeting the human needs and saw the possibility of new approaches and emphases that might be more effective. The dawning of new insight provides the direction for change in the future.

The comments of the intensive clients interviewed at the end of the project, though individual and unique,

had a common theme. The clients appreciated the material support given them by the FOR counselors and the fact that it was given when needed, rather than two weeks or more too late. However the clients seemed never to dwell on the money or tools or job training supplied by FOR. They appreciated these material gifts as tangible evidence that some other human (the counselor in particular) cared.

The most significant area of appreciation was the personal relation the clients had with the counselors. This caring aspect of the counselor-client relationship apparently went far beyond the plan-writing or material-support level. Frequently the counselor as a person was cited as the reason the client was out of prison or alive today. This appreciation of the counselor as a person was also expressed by those who had returned to prison.

In the Atlanta project a special feature was introduced in the area of private and group therapy conducted by psychologists and psychiatrists. The attendance at these meetings was on the whole irregular and the therapy was ended as a result of poor attendance. In many ways the therapy venture, judged by middle-class standards, was viewed as a failure. However, the responses of the clients (who dropped out of the sessions) indicate a different conclusion. Clients (both those successfully closed and others back in prison) stated that the therapists helped them understand themselves better. All their comments about the therapy experience were positive.

The reasons for lack of continuing participation in therapy were varied and different from what would be expected in a middleclass setting. The Atlanta experience indicates a need for further experiments in ways of introducing clients to therapy and providing a program whereby they can participate more consistently.

Don Chandler
Atlanta Project Observer

NOTE: Dr. Candler's comments relate only to the course of therapy that he observed in the free world community and not the sessions that were held in the Atlanta Penitentiary, where attendance was quite regular. (W.S.F.)

APPENDIX B-1

Report No. 1 Final Observations

This is a report of an interview with Mr. William Walker. The interview took place on Friday, February 14, at 7 P.M., in Mr. Walker's home at 00 Smith St., S.E., Atlanta, Georgia. The interview lasted forty-five minutes and took place in his living room. His wife, who was in the kitchen during the conversation, was able to hear everything that was said. Their two children were in and out of the room several times. Mrs. Walker was invited into the room in the latter portion of the interview and asked to give her comments, which are a part of this report.

The interview began with the generalized question, "What are your reactions to the project?" Mr. Walker's response was, "If it wasn't for the project, I'd be in prison today."

He mentioned that the two things that were of the greatest help were education and rent money. The rent money referred to a rather lengthy period of time when Mr. Scott Fulton helped him over financial crises, providing money for both rent and food for his family. Mr. Walker, showing a great deal of affection for his wife and children, said that he wasn't inclined to steal now, but if they were hungry and that's all he could do, he would steal to get food. Mr. Fulton's ability to supply money when needed helped him to work through the first months of difficult times.

The education mentioned by Mr. Walker referred to the therapy sessions with Dr. Ed Askren. He stated that his involvement with Dr. Askren helped him understand himself and others. He mentioned, incidentally, that he was a gambler and liked to study people and this helped him to anticipate the moves of other people. The main value to Walker of Dr. Askren's therapy, however, was an increased understanding of himself.

When asked to indicate any other benefits from his relationship to Scott Fulton, he stated that although his wife and children loved him, stood by him during his eleven years in prison, and were with him when he was released, he needed somebody else in society who cared. He mentioned that knowing that Mr. Fulton cared had meant a lot to him. He told of one example when Mr. Fulton gave him ten dollars out of his own pocket for food. Mr. Walker said that gift was of course for food but it meant a lot more to him than food. All through the interview Mr. Walker made repeated comments that if it wasn't for that man (Mr. Fulton) he would be back in jail. This comment was made at least fifteen times during the forty-five minute interview. He stated repeatedly, "You just can't describe that man."

He went so far as to refer to Mr. Fulton as the nearest thing to a father that he had ever had.

In the course of the forty-five minute conversation he referred to the project (meaning the research project) a number of times, saying that if it is shut down, they might as well not release any more prisoners, because they will never make it.

When asked if other people had been of assistance to him, he had little to say. When asked specifically if his parole counselor had been of any assistance, he said yes, he was an understanding and considerate man and had given him one lead to a job. Also at one point when he had gotten into difficulty, he could have lost his parole and been sent back to prison but was not. He was appreciative of his parole officer.

Mr. Walker spent some time giving his present philosophy of life, which repeatedly included the comment, "I'm free." This fact obviously is of tremendous significance to him. Even though he is in debt and has other difficulties, he seemed to have freedom to hold on to and appreciated it enough to think twice before getting into trouble.

Mrs. Walker was asked to come into the living room at this point and mention any of the things that were most outstanding in her mind concerning what the project had done. She mentioned again the rent aid at a time when they were desperate and the number of times that Scott had helped them financially. I asked her then if she noticed any change in Mr. Walker's attitude. (The atmosphere of the interview was relaxed and Mr. Walker was not at all embarrassed to sit there and let her discuss him.) Mrs. Walker said, "He didn't use to care. Now he wants to work. He wants to stay home with me and the children."

Mr. Walker also mentioned in connection with his change of attitude that he realized now he doesn't have to have money to be happy, that he must have love, referring to the love of wife and children. Near the end of the discussion Mrs. Walker mentioned another feature that meant a lot to her. She said that Mr. Fulton would call her at home to check on how she was getting along while Mr. Walker was still in prison.

SUMMARY: Obviously the most important feature in the rehabilitation of Mr. Walker was the counselor in his life at the strategic moment of leaving the prison. The development of a relationship with the counselor while in prison is not to be minimized. The major asset surrounding this relationship was the freedom of the counselor to supply money when needed without any regard to red tape restrictions. Another factor which seemed to be of equal or perhaps more importance, was the personal relationship between the counselor and the

client. Reflecting on all of the discussions we have had for the past three years concerning innovative services, I recognize that both of these features are not possible in the regular case load. The money is not available when needed and the work load is so great that the average counselor cannot spend the kind of time that

makes for the personal relationship described in this interview.

Dr. Don Chandler
Project Observer

NOTE: Name and address were changed for obvious reasons. (W.S.F.)

APPENDIX B-2

Report No. 2 Final Observations

This report is based on an interview with Mr. Harold Burk, who lives at 123 Anywhere St., N.W., Atlanta, Georgia. The interview took place at 4:30 P.M., Monday, February 17, 1969, at his home. Mr. Burk lives in a Negro section of small homes, presumably owned by the dwellers, situated on narrow streets, with no space for driveways between the houses. All cars are parked on the street. The houses are not well kept. Both Mr. and Mrs. Burk work and basically reflect the value system of the neighborhood. They have a late-model Pontiac, a large color television, and a blue Princess telephone, all within the surroundings of a very drab house.

Mr. Burk, a welder, had been off from work on the day of the interview because of a lack of materials at the plant. He apparently had a steady job, not affected by weather.

Another man was at the house when I arrived, along with Mrs. Burk. I was taken into the kitchen-dining room area and the interview was conducted around the dining table. Mrs. Burk was in and out of the area, putting away groceries, as they had just returned from shopping.

Mr. Burk's response to an opening general question was, "I don't know what I would have did without this help," referring to the FOR support. When asked to elaborate what he meant by support, Mr. Burk referred first to the financial support given him, stating that he had nowhere to go and nothing to do when released from prison. He referred with disdain to the small sum that he received on release. He had been sick and had received help with medical expenses, clothes, and welding equipment. In his mind all three items represented something he could not have obtained legitimately without the assistance of the FOR project.

According to Mr. Burk's comments he was a first offender and did not seem to think of himself as a law-breaker, nor was he hostile toward society. After the interview was over, however, he talked for ten minutes about the raw deal he got in being given a sentence for handling illicit liquors, maintaining that he was simply picked up by a friend and was along when the friend was caught. He seemed to be bitter about this fact but gave no indication of wanting to fight society or of having any indication toward law-breaking again. The cause of Mr. Burk's arrest has not been checked nor were his statements questioned at the time of the interview. They were simply accepted at face value.

After Mr. Burk's comments about the financial help he mentioned the value of the group meetings conducted by the psychiatrist, Dr. Askren. According to his statements, he had attended a number of these meetings in prison and after release as well. When asked to be more specific about what he had gotten from the meetings, he was unable to give an answer. His response, after two or three attempts to probe further, was simply that so much happened he wouldn't know how to explain it. The one response made in answer to several related questions was that he had been helped to understand a number of things about himself that he had never known before. His comments at this point were reminiscent of the comments made by Mr. Walker in Report No. 1. Within the discussion of Dr. Askren's contribution to him he stated, "That man sure made me mad the first two or three sessions, but then I discovered that he knew what he was doing and then I began to listen to what he was saying." (Dr. Askren's approach in therapy is very aggressive. Apparently this aggressive method of attack gets through to people who have been in prison.)

Mr. Burk referred to Mr. Scott Fulton as a friend. During the discussion of Mr. Fulton's contributions, Mr. Burk's appreciation of him was expressed in a number of non-verbal ways. He mentioned that on several occasions he would simply go by Scott's office and visit with him. He stated that he had thought about going by Scott's office on the day of the interview. He specifically made reference to the fact that Scott Fulton "will take time with you."

Mr. Burk was asked if at any time during the project his needs were not met and he stated positively that he was helped every time he had asked. When asked if he had any recommendations to make, he reaffirmed the fact that he had gotten everything he needed.

Once when his wife was in the kitchen she was asked what she saw as the greatest asset of the whole experience. She replied with some humor, but pointedly, that he now is interested in working, when in the past he was not. They joked with each other about this fact and he jokingly told her to "Get out of here," which she felt under no pressure to do. After she left the room Mr. Burk reaffirmed what she had stated. He said that he doesn't have to work six days a week to make enough to live on, but if the job is there he goes ahead and works anyway.

Mr. Burk had been a truck driver before his imprisonment and even when he was sharing his bitterness about being arrested "unfairly" he recognized that he now has the best job he has ever had and that he would not have become a welder had he not been imprisoned. He had to admit that he had benefitted from the whole

experience. During this conversation he implied that he had some sense of pride in his work now as compared to his previous work as a truck driver. No doubt this fact would in part account for his more stable work pattern, although a number of other factors probably contributed also.

In the closing ten minutes of the conversation, after I had concluded the interview proper, Mr. Burk reaffirmed that he didn't know what he would have done

upon his release if it had not been for the assistance given him. He mentioned again the group work with Dr. Askren and as I was leaving the house, he said, "If you all ever get another group started let me know. I'd like to be in it."

Dr. Don Chandler
Project Observer

NOTE: Name and address were changed for obvious reasons. (W.S.F.)

APPENDIX C

I. Introduction

A. Background Information

1. Although it had been discussed previously in general terms, this sub unit of the Atlanta Federal Offenders Rehabilitation Project was a direct outgrowth of conversations held during the annual FOR Program conference in Denver, Colorado in 1967, involving Mr. Percy B. Bell, FOR Program National Director; Mrs. Merlyn Matthews, National Research Director; Mr. Lewis Schubert, who was then the Vocational Rehabilitation Administration Regional Representative for Region 4; Mr. W. A. Crump, Atlanta Project Director; and W. Scott Fulton, Atlanta Plan C Counselor. The study was founded in recognition of the fact that the majorities of the inmate populations of most federal penal institutions are not natives of the states in which these institutions are located and consequently do not ordinarily have local release destinations, and with the resultant concern that any such majority can not advisedly be ignored by a VR Agency proposing to continue a program of services in a Federal facility.
2. Because of the involvement of the Georgia Office of Rehabilitation Services with the U. S. Penitentiary, Atlanta, for many years (as described in the parent project report), Atlanta was considered a favorable site for a demonstration effort directed toward developing a system of out-of-state referrals.
3. The Sub-Project was authorized on March 1, 1968, and continued through the termination of the parent Atlanta Project on February 28, 1969.

B. Purpose

Focusing upon the needs of the non-Georgian inmates of the U. S. Penitentiary, Atlanta, the Sub-Project was designed to test the advisability and feasibility of inaugurating a system of making out-of-state referrals. Its success was to be measured in two areas: (1) its effectiveness in enlisting positive response to referrals from other state agencies and (2) the amount of favorable follow-up data accumulated on services provided by such VR agencies operating under their own state concepts and policies.

II. Methodology

A. Counselor

The Plan C Counselor was assigned to the Sub-Project on a part-time, or additional assignment, basis. The caseload was essentially handled in a fashion similar to general VR caseloads, and the usual FOR research data was not collected and submitted to National Headquarters. For a description of the general setting and comparative details with the parent project, please refer to the complimentary sections in the Project Report.

B. Proposed Operating Design

1. Timetable

Case services should actually begin February 1, 1968. The Sub-Project should terminate February 28, 1969. This period covers a span of thirteen months, August 1968 being the seventh or mid-month, (please see the section below entitled **Release Period**). Allowance is thereby made, give or take a month, for six months work with the client by Sub-Project staff while he is still incarcerated, during which time it is hoped that referral will be effected, and for six months of service by the receiving state agency and the accumulation of follow-up data.

Case findings and evaluation should begin as soon as the Sub-Project is approved. It should be noted that this will take a considerable amount of time, particularly since one hundred psychological evaluations will be involved. Hopefully this "tooling-up" period will be completed by February 1, 1968, at which point it is anticipated that the referral system will be inaugurated to be followed by the implementation of case services.

2. Caseload

Because of the limitations of time and staff, it is believed that we should confine the experiment to working with an even 100 referral clients.

3. Release Period

It is suggested that we work with clients whose minimum expiration of sentence dates fall during the months of July, August and September 1968. This would provide an initial list of approximately

200 inmates from which to select 100 clients for adoption by the Sub-Project. In the event that we are unable to find 100 cases from among the re-releasees of this period (although obtaining that number should be no problem), then we could expand the release period from each end, i.e., bring it forward to June 15, 1968, and extend it to September 15, 1968, etc., until the goal of 100 cases is reached.

4. Selection at the Screening Level

Prior to interview, institutional records will be reviewed. All inmates whose release dates fall within the period prescribed above will be favorably considered for service except those who:

1. Will be under sixteen or over fifty-five years of age on February 1, 1968.
2. Are aliens subject to deportation.
3. Have inordinate records of felony convictions.
4. Have been convicted of unsavory offenses such as repeated crimes of violence or child molestation.
5. Are totally disabled toward employment.
6. Have any background factors whatsoever that would eliminate **reasonable** prospect of successful referral.

5. Acceptance at the Interview Level

Having been favorably considered according to the criteria outlined in the preceding paragraph, a prospective client will be interviewed to determine whether or not he is interested in the possibility of receiving Sub-Project services. If he does express such an interest, as well as a willingness to undergo the necessary diagnostics, he will be entered into a program of evaluation to determine his eligibility.

6. Determination of Eligibility

As per Mr. Bell's suggestion, Alternative #3, previously listed in the June 20 memo on Initial Proposals under the section entitled **Eligibility**, is offered as the basic criterion for determining eligibility. This refers to "Behavioral Disorders" and the methods for establishing this disability as outlined in Sections 5.18.06 of the Georgia State Manual of Policies. This is believed to have the most desirable set of criteria because of the following reasons: (1) unlike the general FOR position, this approach would provide a diagnostic basis to other states for accepting clients, and (2) it is felt that this will become the most universal basis for accepting the offender-client of the near future. In making determinations, purchased diagnostics will be required as well as the prison team approach.

7. Caseload Management

Not during the screening process, but after the initial interview, clients interested in receiving services will be placed on the caseload in Status 00. Since such clients will in effect be applicants for services, cases will then move to Status 02. Upon completion of diagnostics and the establishment of a behavioral disorder or other identifiable mental or physical disability, and if in addition an expression of acceptance is received from the home agency, a case will be accepted in Status 10. Although tentative rehabilitation plans will hopefully be developed in conjunction with receiving state agencies, it is suggested that no formal plans be written by the Sub-Project counselor, this prerogative being left to the home agency, and that all services rendered prior to release from prison be provided under Code "A". When a client is released and returns home, the case will be "transferred" and closed in Status 30. This procedure would avoid closing a number of cases in Status 28, and it would also avoid the use of Status 08 except, of course, in those cases wherein referral is refused by the home state agency. The accumulation of follow-up data will begin after closure and continue until the Sub-Project ends.

8. Service Plan

As per Mr. Bell's suggestion, Alternative #3 as listed on Page 3 of the memo on "Initial Proposals" is offered as the most acceptable plan. This plan calls for the provision of purchased diagnostics as part of the initial referral, which will also contain a proposal for providing further purchased services as indicated if the receiving agency will respond with a commitment of eventual client acceptance. If, however, the referral is denied, no further service will be provided and the case will be closed in Status 08.

9. Indicated Services

In addition to diagnostics, the following are types of purchased services that might be provided to referral clients while still in confinement:

1. Group Psychotherapy
 2. Prosthetic Appliances (when not provided by the Bureau of Prisons)
 3. Correspondence Courses
 4. Training Materials and Textbooks
 5. Hearing Aids (These are not furnished by the Bureau of Prisons)
10. Subsequent to initial interview but prior to the completion of diagnostics, a case may be closed, and a substitution considered, for reasons such as the following: (1) material change in length of

sentence, (2) change in client attitude toward receiving services, (3) death, or (4) any development that might eliminate reasonable prospect of successful referral. However, once diagnostics are completed and eligibility is established, no substitution will be made (even though the referral might categorically be refused by the home state agency) and any further case developments will be made a part of the research study. When eligibility is established in 100 cases, no further client selection will be attempted.

11. Referral

As soon as case evaluation is completed and eligibility is established, an initial referral letter will be sent to the home state agency, usually addressed to the appropriate district supervisor. The general approach outlined below will be followed.

12. General Approach

Although national interest in rehabilitating public offenders has greatly advanced in recent years, it has nevertheless been our experiences in serving the general caseload at the Atlanta Penitentiary that resistive attitudes toward handling ex-convicts will occasionally be encountered from state agencies and/or their counselors. It is therefore suggested that a basic plan be adopted for attempting to generate interest early in clients on the part of home state agencies without asking for any specific service at the time and then keeping this interest alive by providing periodic information such as training progress reports, efforts toward self-improvement, and development of attitudes toward re-socialization rather than simply making referrals at or near the point of discharge. Hopefully, home state counselors will thereby respond with a willingness to share in the rehabilitation process even while a client remains confined, if to no greater extent than suggesting the suitability of vocational preferences and objectives to local labor market conditions. Even limited participation should develop more amenable attitudes toward acceptance as potential clients advance through the counseling process and approach release from prison.

13. Research Instruments

Because of the time factor, it is suggested that the existing FOR devices, designed to measure attitudinal change, social adjustment and job stability, should not be administered. It is also believed that to request receiving state agencies to administer and complete these forms might be reductive to case acceptance response and would therefore distort a basic measurement of the study. However, devices should be developed for recording the following data:

1. Number of cases screened.
2. Number of cases accepted at the screening level.
3. Number of cases rejected at the screening level.
4. Reasons for rejection.
5. Number of cases accepted at the interview level and placed on the caseload.
6. Number of disinterested clients not placed on the caseload.
7. Number of substitutions.
8. Reasons for substitutions.
9. Number of cases determined ineligible by diagnostics.
10. Reasons for ineligibility.
11. Number of cases determined non-feasible by diagnostics.
12. Reasons for non-feasibility.
13. Number of cases accepted by receiving state agencies.
14. Number of cases refused by home state agencies.
15. Reasons for refusal.
16. Receiving state agency case disposition.
 - a. Closure status
 - b. Other status at termination of Sub-Project.

14. Other Data

It is assumed that case histories and other pertinent VR forms will be submitted to Program Headquarters in Seattle in accordance with procedures of the parent FOR Program.

15. Success Measurement

Basically, the success of the Sub-Project will be measured by two factors: (1) the percentage of referrals accepted by the receiving state agencies and (2) the percentage of favorable case dispositions following services rendered by the receiving state agencies

C. Actual Operating Design

1. Timetable

Since the project was not authorized until March 1, 1968, case screening and evaluation did not begin in the Fall of 1967, as has been originally anticipated. In view of the time consumed in case screening, interviewing and evaluation, cases services during incarceration had to be virtually eliminated and referrals were made on the less attractive basis of evaluation alone.

2. Caseload

Although the Sub-Project was originally designed to involve 100 clients, shortly after its inception

reality factors dictated an anticipated reduction to 50 referrals; ultimately time permitted the adoption of only 26 cases.

3. Release

Whenever possible the proposed release period was limited to the months of July, August and September, 1968

4. Selection at the Screening Level

Selection at the screening level was accomplished as originally proposed (please see the preceding section entitled **Proposed Operating Design**).

5. Acceptance at the Interview Level

Acceptance at the interview level was accomplished as originally proposed.

6. Determination of Eligibility

Determination of eligibility was accomplished as originally proposed.

7. Caseload Management

Caseload management was accomplished as originally proposed.

8. Service Plan

As previously noted, due to the limited time factor, case services themselves were virtually eliminated and referrals were made on the basis of evaluation alone.

9. Substitutions

There were no substitutions on the caseload subsequent to initial interview.

10. Referral

Referral procedures were accomplished as originally proposed.

11. General Approach

The general approach originally proposed was abandoned due to the time factor.

12. Research Instruments

Data recording forms were developed as originally proposed.

III. Results

A. CONCLUSIONS

1. While it was originally hoped that all cases would have been evaluated by March 1, 1968, permitting the launching of case services at that point, it was impossible to secure authorization for the Sub-Project until that date, and thus the initial process of case screening did not begin until then.
2. The proposed operating design called for work with

selected releasees of July, August, and September 1968, from the U. S. Penitentiary, Atlanta, but the release lists for these months did not yield anywhere near the number of anticipated potential clients primarily because (a) the total number of dischargees fell below expectation and (b) the number of dischargees under detainer was much higher than originally estimated.

3. In view of the time consumed in case screening, interviewing and evaluation, case services during incarceration had to be virtually eliminated and referrals were made on the less attractive basis of evaluation alone. (Please refer to the "Proposed Operating Design" in the Sub-Project Report, Appendix A of the Project Report).
4. Since the Plan C Counselor was responsible for the conduct of the Sub-Project on a part-time or additional assignment basis, intense concentration on the development of client-counselor relationships was not realized. Again because of the time factor, referred clients were released after only three or four diagnostic interviews and for the most part departed unconvinced that vocational rehabilitation services had anything substantive to offer them.
5. Consequently a number of them made no effort to follow through with the interviews arranged for them with the receiving home state agencies.
6. Although almost all of the receiving states responded with interest to the referrals made prior to client release, and although most of these agencies apparently made sincere contact efforts even if the releasees referred to them did not, a number of cases had to be dropped either due to inability to locate or client failure in follow-up.
7. Since most state VR agencies are not budgeted sufficiently to serve all of their own disabled citizenry, and since no production reward system has as yet been devised for making out-of-state referrals, it is anticipated that difficulty will be encountered in sparking the interest of potential host agencies toward adopting a program similar to the outline in this sub-project, even though residency is no longer a legal criterion for eligibility.
8. The Sub-Project was originally designed to involve 100 clients shortly after its inception reality factors dictated an anticipated reduction to 50 referrals; ultimately time permitted the acceptance of only 26 cases.
9. 135 cases were screened and 52 cases were determined acceptable at the screening level.
10. 83 cases were rejected at the screening level, 14 being overage for employment in accordance with the criterion established by the parent FOR Pro-

gram, 4 due to lack of U. S. citizenship, 21 due to Georgia release destinations (thus negating out-of-state referrals) and 38 due to detainers.

11. Of the 83, only 6 were rejected at the screening level due to excessive criminal records or conviction of crimes believed to be too unattractive in nature to permit realistic anticipation of successful referral.
12. 42 of the clients found acceptable at the screening level were interviewed and 10 were not due to unexpected early release dates (parole or extra good time granted).
13. Of the 42 interviewed, 26 said that they were interested in receiving referral services and 16 said that they were not. The 26 who expressed interest were placed on the caseload.
14. Of the 26 who initially expressed interest, 5 ultimately dropped out because they decided on second thought that they were unwilling to undergo psychological evaluation.
15. An additional 2 did not receive projective testing due to unexpected early release. Referrals were nevertheless made in these cases without comprehensive evaluation.
16. Of those who did not complete psychological evaluation, all 19 were found to be eligible under normal VR criteria at least on the basis of behavioral disorder, and none were considered non-feasible.
17. 21 out-of-state referrals were actually made. The following items pertain to information gathered from the receiving state agencies.
18. 18 states accepted referral prior to release, at least to the extent of expressing willingness to consider personal application from the clients referred.
19. The response of 2 states was indistinct and it was not possible to assess interest.
20. Only 1 state responded to referral prior to release in the negative.
21. The following items pertain to follow-up data gathered from the receiving state agencies.

22. 1 client was closed rehabilitated (in VR status 26).
23. 5 clients were in active status at the close of the Sub-Project.
24. 2 clients were still in referred status at the close of the Project.
25. 1 active client was closed in other than Status 26.
26. 12 clients were not placed on caseloads, primarily due to lack of contact.

IV. Implications for Change

Since residency is no longer an eligibility criterion, services to out-of-state clients is legal; however, it is believed that if such an activity is ever to be made attractive to state agencies, then 100 percent federal funding will have to be instituted, and some new production reward system, perhaps similar to that employed by Disability Determination Units, will have to be developed.

V. Summary

The success of the Sub-Project was to be measured in two areas: (1) its effectiveness in enlisting positive response to referrals from other state agencies and (2) the amount of favorable follow-up data accumulated on services provided by such agencies operating under their own state concepts and policies. Given a limited number of clients involved, the Sub-Project was quite successful in the first of these measurement areas, since almost all of the receiving states responded in positive fashions, at least to the extent of reflecting interest in working with the referrals. However, failure was basically experienced in the second area for a variety of reasons not believed to be attributable to the receiving agencies. Yet, in substance, our most salient finding was that there was ample indication throughout the Sub-Project that a similar study should be attempted once again, but on a more elaborate basis. Note: With the completion of this report, all activities of the Sub-Project terminated in conjunction with the conclusion of the parent Atlanta FOR Project.

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